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| **Medical Grand Challenge 2025/26**  ***Healthier by Design: Building Tomorrow’s Solutions***  **Letter of Support for Open Category** |

*For teams working on projects previously entered in other competitions, with substantial progress in their project.*

To:

Organising Committee of NUS Medical Grand Challenge 2025/26

Yong Loo Lin School of Medicine, National University of Singapore

I have received a request from a team consisting of a medical student from my medical school to endorse them in their participation in the **Open Category** of NUS Medical Grand Challenge 2025/26.

**Team Name:**

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**Project Members [Name/Year/Faculty/Email]:**

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|  |

**Project Name:**

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**Project Outline/Description:**

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|  |

**Amount of funding raised for this project (if any):**

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**For teams**

As the *team leader*, I confirm that the following criteria indicated in the checklist below have been reviewed and verified.

|  |  |  |  |
| --- | --- | --- | --- |
| **ID** | **Criteria fulfilled by my team** | **Yes** | **No** |
| 1.1 | The team has reviewed and acknowledges that the project we will continue to work on has been previously submitted for other competitions. |  |  |
| 1.2 | The team has reviewed and confirms that our proposed project extension, to be submitted for the Medical Grand Challenge 2025/26, **has not been submitted in any prior or ongoing local or international competition as at 30 September 2025**. |  |  |
| 1.3 | The team confirms that the current state of our project is at a **technological readiness level of 4 and above**. **We will work towards level 5 in MGC 2025/26**. |  |  |
| 1.4 | The team confirms that, **as at 30 September 2025**, we have **received no more than USD 50,000** in private funding collectively from all organisations for the MGC-related project. |  |  |

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*Name and Signature of Team Leader*

**For Dean (only for non-NUS Medicine teams)**:

I have confirmed and reviewed that all information presented in this form is correct as of

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

*(Date)*

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*Name, Signature of Dean and Official School Stamp (if any)*