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

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 **Nascent Category** of NUS Medical Grand Challenge 2025/26.

**Team Name:**

|  |
| --- |
|  |

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

|  |
| --- |
|  |

**Project Name:**

|  |
| --- |
|  |

**Project Outline/Description:**

|  |
| --- |
|  |

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

|  |
| --- |
|  |

**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 confirms that our project idea is original, not patented, and entirely initiated by us, with the solution developed independently from the ground up. |  |  |
| 1.2 | The team has reviewed that our proposed project idea, which we are going to submit for the Medical Grand Challenge 2026, has not been submitted for participation 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 1 and below**. |  |  |
| 1.4 | The team confirms that, **as at 30 September 2025**, we have **received no more than USD 5,000** in private funding collectively from all organisations for the MGC-related project. |  |  |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*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)*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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