

Center for Excellence in Collaborative Education  
Interprofessional Student-led Mini-Grant

Contact Sheet

To Apply

Center for Excellence in Collaborative Education [CECE@...](mailto:CECE@...)

Title of Project \_\_\_\_\_

Student Team\* \_\_\_\_\_

A. \_\_\_\_\_ Profession #1: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

B. \_\_\_\_\_ Profession #2: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

C. \_\_\_\_\_ Profession #3: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

D. \_\_\_\_\_ Profession #4: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Faculty Mentor(s)

\*A: \_\_\_\_\_ Letter of Support \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

B: \_\_\_\_\_ Letter of Support \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

C: \_\_\_\_\_ Letter of Support \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

D: \_\_\_\_\_ Letter of Support \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Program Director or Faculty Mentor: \_\_\_\_\_ Signature \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**SUPPORT DOCUMENTS REQUIRED for CECE Student-led Mini-Grant**

**Application Letter**

- (a) T P c
- (b) D c c, a ac a b a a a
- (c) Bac /S ca c a S c A P c ( b c , b -  
ac a )  
P a b bac a a c a a ca c  
a a IPE a / ab a , a / a -c ac c  
Sa c ca c a c a ( . . , c ,  
/ b a , a a ) .  
l c a c a b a R a c &

> ? @!