附件3

口腔医学院第十届优秀教学奖参评教师汇总表

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 学院及系别 | | |  | | | 填报时间 |  |
| 系参评教师人数 | | |  | | | 推荐院级人数 |  |
| 参评教师基本情况 | | | | | | | |
| 类别 | 姓 名 | 年龄 | | 职 称 | 讲授课程 | | 联系电话 |
| 新  秀  奖 |  |  | |  |  | |  |
|  |  | |  |  | |  |
|  |  | |  |  | |  |
|  |  | |  |  | |  |
|  |  | |  |  | |  |
| 园  丁  奖 |  |  | |  |  | |  |
|  |  | |  |  | |  |
|  |  | |  |  | |  |
|  |  | |  |  | |  |
|  |  | |  |  | |  |