附件6：

**年 学期娄底职业技术学院信息化课程认定申请汇总表**

 二级学院（教学部）： 联系人： 电话：

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 序号 | 申报人姓名 | 职称/职务 | 课程名称 | 所属专业 | 授课课时 | 任课班级（不超过2个） | 第一次认证 | 是否申请优秀 | 课程平台及网址 | 备注（阶段课上课时间等） |
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