附件1：

邵阳学院优秀教学质量奖申请书

系（部、院）：

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **参评课程基本情况** | | | | | | | | | | | | | | | | | | | | |
| 申报课程名称 | | |  | | | | | | | | | | | | | | | | | |
| 总 学 时 | |  | | 本人讲授学时 | | | | |  | | | | 授课班级 | | | |  | | | |
| 起止时间 | |  | | | | | | | | | | | | | | | | | | |
| **近两年承担教学工作情况** | | | | | | | | | | | | | | | | | | | | |
| 课程名称 | | | | | 授课对象 | | | | | 学 时 | | | | | | 第 学期 | | | 工作量 | |
|  | | | | |  | | | | |  | | | | | |  | | |  | |
|  | | | | |  | | | | |  | | | | | |  | | |  | |
|  | | | | |  | | | | |  | | | | | |  | | |  | |
|  | | | | |  | | | | |  | | | | | |  | | |  | |
| **任课教师情况** | | | | | | | | | | | | | | | | | | | | |
| 姓名 | |  | | 性别 | |  | | 年龄 | | | |  | | 职称 | | |  | | | |
| 所学专业 | |  | | | | | | | | | | | | 毕业时间 | | | |  | | |
| 文化程度 | |  | | | | 学位 | | | | |  | | | 任教时间 | | | |  | | |
| **近两年教学研究与改革立项与成果情况** | | | | | | | | | | | | | | | | | | | | |
| 起止时间 | 项目、课题、成果名称 | | | | | | 本人作用（主持、参与） | | | | | | | | 完成情况 | | | | | 备注 |
|  |  | | | | | |  | | | | | | | |  | | | | |  |
|  |  | | | | | |  | | | | | | | |  | | | | |  |
|  |  | | | | | |  | | | | | | | |  | | | | |  |
| **近两年教材与教学研究与改革论文情况** | | | | | | | | | | | | | | | | | | | |  |
| 起止时间 | 名称 | | | | | | 出版、刊登情况 | | | | | | | | 合（独）著 | | | | |  |
|  |  | | | | | |  | | | | | | | |  | | | | |  |
|  |  | | | | | |  | | | | | | | |  | | | | |  |
|  |  | | | | | |  | | | | | | | |  | | | | |  |
| 课程主要内容及目标简介 | | | | | | | | | | | | | | | | | | | | |
| 本课程教学拟采取的方法、手段和具有的特色 | | | | | | | | | | | | | | | | | | | | |
| 教研室意见（根据评审条件签署具体意见）：  教研室主任签名：  年 月 日 | | | | | | | | | | | | | | | | | | | | |
| 院、系、部、中心意见：  主任签字（盖章）：  年 月 日 | | | | | | | | | | | | | | | | | | | | |
| 校优秀教学质量评审委员会意见：  评审委员会主任签名：  年 月 日 | | | | | | | | | | | | | | | | | | | | |
| 学校审定意见：  年 月 日 | | | | | | | | | | | | | | | | | | | | |

附件2：

邵阳学院优秀教学质量奖推荐汇总表

系（部、院）：

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 序号 | 候选人 | 年龄 | 专业技术职务 | 申报课程名称 | 联系电话 | 备注 |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

负责人： （签章）