附件2

2019年度网上教学优秀教师评选申报汇总表

单位： 市校联系人： 联系电话：

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **姓名** | **所在单位（部门）** | **课程名称** | **课程ID** | **授课学期** | **教育****层次** | **课程所在平台** | **所属教学团队** | **团队担任职责** | **选课人数** | **联系电话** | **备注** |
| **1** |  |  |  |  |  |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |  |  |  |  |  |  |