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| **江苏省职业院校教师访学研修/企业实践项目申报信息汇总表（高职）**  单位名称: （公章） 联系人： 电话：   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | 项目 | 序号 | 院系（部门） | 教师姓名 | 性别 | 出生年月 | 学历/学位 | 职称/职务 | 近三年内曾主持或参加的重大课题名称及来源（限填3条） | 访学研修/企业实践单位 | 访学研修主题/企业实践岗位 | 指导教师姓名 | 访学研修/企业实践起止时间 | 预期成果形式 | 手机号码 | | 个人访学研修 | 1 |  |  |  | 格式：1985.01 |  |  |  |  |  |  | 格式：2024年9月至2025年8月 |  |  | | 团队访学研修 | 1 |  |  |  |  |  |  |  |  |  |  | 格式：2024年9月至2025年8月 |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | | 企业实践 | 1 |  |  |  |  |  |  |  |  |  |  | 格式：2024年\*\*月至\*\*\*年\*\*\*月 |  |  | | 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |   备注：1.“预期成果形式”一栏为研究报告、咨询报告、学术论文、发明专利、软件著作权等。  2.“主持或参加的重大课题名称及来源”一栏请标明“主持”或“参加请标明排名”。  3. 访学研修周期为一年，企业实践周期为连续的26周。 |