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| --- | --- | --- | --- | --- | --- | --- | --- |
| 附件2： |  |  |  |  |  |  |  |
| **山西应用科技学院课程思政示范课程申报汇总表** | | | | | | | |
| 申报学院/部门： | |  |  |  |  |  |  |
| 学院/部门申报联系人： 联系电话： 电子邮箱： | | | | | | | |
|  | | | | | | | |
| **序号** | **课程名称** | **课程代码** | **课程类别** | **所属专业** | **课程负责人** | **职称** | **联系方式** |
| 1 |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |
| 备注：课程负责人原则上只有1人；课程类别选填“通识必修课程”、“通识选修课程”、“专业必修课程”、“专业选修课程”。 | | | | | | | |