湖南师范大学遴选实践型专业学位硕士研究生指导教师审批表

**推荐学院名称：**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **姓 名** | |  | | **性别** | |  | **最后学位** | |  | | **职称/职务** | | | |  | |
| **身份证号** | |  | | | | | **专业学位类别（领域）** | | | | | |  | | | |
| **所在单位** | |  | | | | | | | | **联系电话** | | | |  | | |
| **近五年来本人主要成果（包括论文、著作、教材、专利、报告、工作业绩等）** | | | | | | | | | | | | | | | | |
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| **近五年来本人或指导学生获奖励情况** | | | | | | | | | | | | | | | | |
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| **近五年来本人承担的主要研究项目** | | | | | | | | | | | | | | | | |
| **序号** | **项目编号、课题名称** | | | | **项目来源** | | | **起止时间** | | | | **科研经费** | | | | **本人排序** |
| **1** |  | | | |  | | |  | | | |  | | | |  |
| **2** |  | | | |  | | |  | | | |  | | | |  |
| **3** |  | | | |  | | |  | | | |  | | | |  |
| **院学位评定分委员会意见** | | | **推荐理由：**  **学院盖章 主席签名： 年 月 日** | | | | | | | | | | | | | |
| **校学位评定委员会意见** | | | **主席签名： 年 月 日** | | | | | | | | | | | | | |