附件2

**广西医科大学基础医学院第十九届教师授课比赛报名表**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **单位** | **教研室** | **姓名** | **性别** | **年龄** | **学位** | **职称** | **课程名称** | **授课内容** | **联系电话** |
| 1 | 基础医学院 |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |