附件5

泉州海洋职业学院校级在线精品课程申报汇总表

学院： 联系人： 手机号：

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **课程名称** | **教育层次（中职/高职专科）** | **课程分类（公共基础课/专业（技能）课程/其他课程）** | **专业大类** | **专业名称（专业代码）** | **课程负责人** | **联系方式** | **备注** |
| 1 |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |