附件5：

**鞍山师范学院第九届师范生教师技能竞赛参赛推荐表**

学院： 负责人： 联系人： 电话： 邮箱：

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| **序号** | **姓名** | **性别** | **专业** | **班级** | **参赛项目** | **指导教师** | **初赛成绩** | **选手联系电话** |
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注：本表经学院盖章后上交教师教育中心（理化楼715） 填表日期： 年 月 日