附件4

**院系审核意见**

|  |  |  |  |
| --- | --- | --- | --- |
| **学院名称** | **课程名称** | **课程章节** | **教师姓名** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**以上课程已通过院（系）审核，同意申报。**

**院（系）签字盖章：**