附件1：

**2024年大连市高中美术学科优质课评比报名表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 |  | | | 性别 | |  | | 学科教龄 |  | | | 职务职称 | |  |
| 工作单位 | | |  | | | | | | | | | | | |
| 毕业学校、所学专业 | | |  | | | | | | | | 学历学位 | |  | |
| 联系  电话 | |  | | | 邮  箱 | |  | | | | 微信或QQ号 | |  | |
| 授课  课题 | |  | | | | | | | | 授课  年级 | | |  | |
| 百度云盘链接地址 | |  | | | | | | | | 提取码 | | |  | |
| 近三年主要业绩（专业、学科教学两方面） | |  | | | | | | | | | | | | |
| **学校意见**  **学校盖章**  **年 月** | | | | | | | | | | | | | | |