**附件5**

**浙江万里学院研究生示范课程验收汇总表**

**单位（部门）（盖章）： 联系人： 联系电话：**

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| **排序** | **课程名称** | **课程类型** | **课程负责人** | **目标完成情况** | **单位（部门）验收意见** |
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