附件2



研究生指导教师资格申请表

申 请 人\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

导师类别\_\_ 硕士研究生导师\_

学科专业\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

研究所\_\_大连化学物理研究所\_\_

中国科学院大学制

年 月 日 填

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| 姓名 | | | | | | |  | | | | | 性别 | | | | |  | | | | | | | 一寸照片  （必须） | | | | |
| 出生年月 | | | | | | |  | | | | | 民族 | | | | |  | | | | | | |
| 籍贯 | | | | | | |  | | | | | 党派 | | | | |  | | | | | | |
| 身份证号 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| 最高学位 | | | | | | |  | | | | | 最后学历 | | | | |  | | | | | | | | | | | |
| 毕业时间 | | | | | | |  | | | | | 毕业院校 | | | | |  | | | | | | | | | | | |
| 专业技术职务 | | | | | | |  | | | | | 行政职务 | | | | |  | | | | | | | | | | | |
| 所在研究组 | | | | | | |  | | | | | 电子信箱 | | | | |  | | | | | | | | | | | |
| 办公电话 | | | | | | |  | | | | | 移动电话 | | | | |  | | | | | | | | | | | |
| 主要学习、工作经历 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 起止年月 | | | | | | | | 单 位 | | | | | | | | | | | | | | | 任职 | | | | | |
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| 计划招生情况 | | | | | | | | 学科专业及研究方向 | | | | | | | | | 计划招生数 | | | | | | | | | | | |
| 硕士 | | | | | | 博士 | | | | | |
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| 汇  总 | 发表论文共 篇，其中被EI/SCI/ISTP/SSCI检索 篇 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 出版专著（译著等）共 部，申请专利 项 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 获奖成果共 项，其中国家级 项，部（省）级 项 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 目前承担的项目共 项，其中国家级 项，部（省）级 项 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 科研经费共 万元，年均 万元 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 近三年最有代表性的科研成果等 | 序  号 | 成果名称  （成果、论文、专著、教材、授权专利、获奖项目） | | | | | | | | | | | | 成果鉴定、颁奖部门  及奖励类别、等级 或发表刊物与出版单位、时间 | | | | | | | | | | | | 本人排名 | | |
|  |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | |
| 目前承担的主要项目 | 序号 | 项 目 名 称 | | | | | | | | | | | | 项目来源 | | | | | 起止 时间 | | | | | | 科研经费 | 本人角色 | | |
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| 研究生情况  近三年培养 | | | | 年 度 | | | | | 学生类别 | | | 招生人数 | | | | | 毕业人数 | | | | | | | 获学位人数 | | | | |
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| 研究生情况  近三年协助指导 | | | | 学生 姓名 | | | | | 培养单位 | | | | | | | 学位类别 | | | 学科专业 | | | | | | 入学/毕业 时间 | | | |
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| 近三年教学情况 | | | | 时 间 | | | | | 课 程 名 称 | | | | | | | | | | 课 时 | | | 授 课 对 象 | | | | | | |
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| 本人郑重承诺，上述情况和材料真实无误，若有虚假，愿承担相关责任。    申请人签字： 日期： | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 所在研究组审核意见  组长签字（公章）：  月 日 | | | | | | | | | | | | | | 所在研究室审核意见  室主任签字（公章）：  月 月 日 | | | | | | | | | | | | | | |
| 研究所学位评定委员会投票结果和审批意见 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 应到会人数 | | | | | | | |  | | | | | 实到会人数 | | | | | | | |  | | | | | | | |
| 同意票数 | | | | |  | | | | | 不同意票数 | | |  | | | | | 弃权 | | | | | |  | | | | |
| 审批意见：  主席签字：  （公章）  年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |