附件2：

2019年江苏城市职业学院会计专业课堂教学案例评比汇总表

**报送单位：（公章） 联系人： 联系电话 手机**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **参评教师** | | | | **参评内容** | | **备注** |
| **姓名** | **职称** | **联系电话** | **电子邮箱** | **参评案例题目** | **使用教材** |  |
| 1 |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |