附件2：

**茂名职业技术学院教职工进修培训计划表**

（ 年度）

单位（部门）： （公章）

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| 序号 | 姓 名 | 性别 | 出生  年月 | 职称 | 进校  时间 | 上次进修  培训时间、类别 | 现从事专业 | 拟进修  培训专业 | 拟进修培训学院（单位） | 拟进修  培训  时间 | 进修培训层次、类别、形式（在选定项打√） | | | | | | | | 备注 |
| 博士 | 硕士 | 本科 | 访学 | 新开课程 | 半脱产（一年以内） | 全脱产 | 不脱产 |
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填报： 审核（领导）： 年 月 日报