**上海师范大学产学合作教育基地推荐表**

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| **■实习基地单位信息** | | | | | | | | | |
| **单位名称** | | |  | | | | | | |
| **法人代表** | | |  | | | | | | |
| **单位地址** | | |  | | | | | | |
| **可接受实习生专业** | | |  | | | | | | |
| **可接受实习生人数** | | |  | | | | | | |
| **单位联系人** | | |  | | | **所属部门** | |  | |
| **联系人**  **电话** | **办公电话** | |  | | | **邮 箱** | |  | |
| **移动电话** | |  | | |
| **■推荐教学单位信息** | | | | | | | | | |
| **学院名称（盖章）** | | |  | | | **推荐专业** | |  | |
| **学院联系人** | | |  | | | **职务职称** | |  | |
| **联系人**  **电话** | **办公电话** | |  | | | **邮 箱** | |  | |
| **移动电话** | |  | | |
| **■推荐理由(请简要阐述单位性质、规模、特色、选作实习基地的理由等，可另附页)** | | | | | | | | | |
|  | | | | | | | | | |
| **推荐学院（盖章）** | |  | | **分管院长签字** |  | | **填表日期** | |  |

注：请准确填写上述信息，完毕后第一时间交学院审核，审核无误后由学院统一交至教务处实践教学科（综合楼207室） 联系电话：64322110