# 攀枝花学院专业学位研究生专业实践考核汇总表

二级培养单位名称：　　（公章）　　分管领导签字：　　日期：

| 序号 | 学号 | 姓名 | 专业名称 | 校内导师 | 产业（行业）导师 | 实践起止时间 | 实践单位名称 | 实践单位地址 | 考核结果 |
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备注：1. 此表在专业学位研究生完成专业实践工作，并提交《攀枝花学院专业学位研究生专业实践总结及考核评价表》后进行汇总。

2. 此表一式两份，一份交研究生院，一份与各研究生提交的《攀枝花学院专业学位研究生专业实践总结及考核评价表》一起存入各培养单位教学档案。