附件2

# 第二批河南省“专创融合”特色示范课程申汇表

学校名称（盖章）

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| 序号 | 课程名称 | 课程性质 | 专业名称 | 专业代码 | 负责人 | 职称 | 联系电话 | 电子邮箱 | 团队成员 | 备注 |
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