附件：

**2020年度虚拟仿真实验教学项目推荐汇总表**

院系负责人签字（盖章）： 院系 (盖 章)

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| 序号 | 实验名称 | 所属课程名称 | 所属专业 | 负责人 | 负责人手机号码 | 负责人邮箱 | 院系排序 |
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| 3 |  |  |  |  |  |  |  |
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