**浙江大学百人计划**

**期中总结报告**

所在单位：

姓 名：

职 工 号：

岗位学科：

填表日期：

浙 江 大 学

填 表 说 明

一、浙江大学百人计划入选者首聘期内期中填写本表，填写内容必须实事求是。

二、本表内有关栏目填写不下的，可另附页。

**三、**本表内有关栏目成果填写要求是以浙江大学为第一署名单位的，否则请注明。

一、简况

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| 姓 名 |  | | 性别 | |  | 国籍 | |  | 出生年月 |  |
| 百人计划岗位类别 | 文科 | 自然科学 | | 岗位类别 | | 学科岗位  名称 | |  | | |
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| 聘期 | 年 月 日 至 年 月 日 | | | | | | | | | |
| 联系电话 |  | | | | | 电子邮箱 |  | | | |

二、聘期内主要学术兼职情况（兼任专业学会、协会职务、专业期刊编委等，请注名起讫年月）

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三、聘期内教学科研情况

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| **3.1聘期内承担教学工作情况** | | | | | | | | | | | | | | | | | |
| **授课名称** | | | | **授课时间** | | **授课对象** | | | | **讲授课时数** | | | | | | **教学评估** | |
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| **3.2聘期内承担主要科研项目** | | | | | | | | | | | | | | | | | |
| **项目名称** | | **项目性质及来源** | | | **项目经费（括号内为本人实际承担经费）（单位万元）** | | | **目前到校经费** | | | | | **项目起讫年月** | | **本人排序** | | |
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| **3.3聘期内获奖情况** | | | | | | | | | | | | | | | | | |
| **获奖项目名称** | | | **奖励名称及等级** | | | **授奖单位** | | | | | **获奖年月** | | | | | | **本人排序** |
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| **3.4聘期内获得专利情况** | | | | | | | | | | | | | | | | | |
| **专利名称** | | | **专利授权国、专利号** | | | | **专利类别** | | | | | **授权公告年月** | | | | | **本人排序** |
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| **3.5聘期内代表性论文、著作情况（**以浙江大学为第一署名单位，否则请注明） | | | | | | | | | | | | | | | | | |
|  | **论文：论文题目，发表期刊名称，卷，期，起止页码，所有作者姓名（本人名字请加下划线，通讯作者名字上用\*标示，共同一作或共同通讯作者请注明个人贡献）** | | | | | | | | | | | | | **发表年月** | | | |
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| **著作：所有作者姓名，书名，出版地，出版社（本人名字请加下划线）** | | | | | | | | | **出版年月** | | | | | **个人字数** | | | **总字数** |
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| **3.6 聘期内担任国际学术会议重要职务及在国际学术会议大会报告、特邀报告情况** | | | | | | | | | | | | | | | | | |
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四、期中工作总结

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| 本栏由本人填写，主要填写以下内容（不超过3000字）：  1．聘期内履行岗位职责、完成岗位工作目标和任务情况（包括教学与人才培养、科研、学科与队伍建设等）；  2．聘期内取得的重要成果的内容、意义和前景，并着重说明其突破和创新之处；  3．对比岗位目标和预期计划，说明完成情况以及存在的问题和建议。  本人签字：  年 月 日 |

五、本人意向确认及学院（单位）意见

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| **1.本人意向确认** | | | | |
| 若期中考核杰出，是否申请长聘教职评审（请在相应选项后打勾√） | 是 |  | 申请长聘职教授评审 |  |
| 申请长聘职副教授评审 |  |
| 否 |  | **/** | **/** |
| 本人签名：  日期： | | | | |
| **2.学院、单位意见** | | | | |
| 若申请人期中考核杰出且申请长聘教职评审，是否同意（请在相应选项后打勾√） | 是 | 同意长聘职教授评审申请 | |  |
| 同意长聘职副教授评审申请 | |  |
| 否 | 不同意长聘教职评审申请 | |  |
| 负责人签名：  公章  日期： | | | | |

注：长聘职即签订无固定期限聘用合同

六、评估委员会评估意见

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| **综合意见** | **杰出** | **进展良好** | **进展不佳** |
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| **负责人签名：**    **公章**  **年 月 日** | | | |

七、学部评估意见

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| **负责人签名：**    **公章**  **年 月 日** |

八、学校审核意见

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| **负责人签字：**    **公 章**  **年 月 日** |