草业学院2016级本科生导师制双向选择确认表

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 学号 | |  | 姓名 |  | | | 性别 |  |
| 联系电话 | |  | | | 班级 |  | | |
| 个人学习目标计划 |  | | | | | | | |
| 拟选择导师及选择理由 |  | | | | | | | |
| 导师意见 | 导师签名：  年 月 日 | | | | | | | |