**附件5**

**石河子大学\*\*学院2020年暑期开放运行实验室统计表**

**单位（盖章）： 报送人： 姓名 联系方式 分管实验室院领导签字：**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **实验室名称** | **楼号** | **房间号** | **承担课程/实验任务** | **学生人数** | **安全责任人** | **联系电话** |
| **1** |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |  |
| **7** |  |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |  |
| **9** |  |  |  |  |  |  |  |
| **10** |  |  |  |  |  |  |  |

窗体顶端