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**博士学位论文答辩委员会表决票**

**（培养单位盖章）**

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| **答辩人姓名** | **：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 学号：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **学科/专业** | **：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **论文题目** | **：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

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| **建议授予博士学位** | **不建议授予博士学位** | **弃权** |
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| **建议推荐为校优秀博士学位论文** | | |
| **建议推荐** | **不建议推荐** | **弃权** |
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**注：请在相应栏划“○”；**

**请勿填写投票人姓名。**

**年 月 日**