**省教育厅科研计划项目学院申报汇总表**

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| **申报单位（盖章）** | | | | | | | | | | | | | | | | |
| **序号** | **项目申请人** | **性别** | **出生年月** | **职称** | **学历** | **项目**  **类别** | **项目名称** | **项目起止年月** | **所属学科领域** | **评审**  **平均分** | **专家1姓名** | **专家1评分** | **专家2姓名** | **专家2评分** | **专家3姓名** | **专家3评分** |
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| 填表人： 所在部门： 联系电话： 手机： | | | | | | | | | | | | | | | | |

注：请按评审平均分从高到低排序