第二批科技副总项目申报汇总表

企业（盖章）： 联系人： 电话： 年 月 日

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **科技副总** | **派出单位** | **年龄** | **性别** | **身份证号** | **研究领域** | **职称/职务** | **学历/学位** | **联系方式** |
| 1 |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |