附件6

衡山县首届优秀科技创新团队汇总表

推荐单位（盖章）： 填表日期： 年 　月 　日

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| 姓名 | 性别 | 出生年月 | 民族 | 政治面貌 | 学历学位 | 职务 | 职称 | 工作单位 | 联系电话 | 备注 |
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