附件4

**浙江省社科联社科普及课题申报汇总表**

**推荐单位：　　　　 　填表人：　　　 　联系电话：　　　　 手机：**

（此表为推荐单位填写）

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| 序号 | 课题名称 | 负责人 | 职称 | 推荐单位 | 联系方式（手机） | 成果形式 | 成果字数(万字） | 完成时间 | 是否愿意立项不资助 |
| 1 |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |
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| 6 |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |
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