附件1：

南京医科大学康达学院“科研人才培养计划”培养对象申请表

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| 姓 名 | |  | | 性别 |  | | 民族 | |  | | 出生  年月 | |  | | |
| 部 门 | |  | | 手机 |  | | | | 邮箱 | |  | | | | |
| 现任专业技术职务及任职时间 | | |  | | | | 政治  面貌 | |  | | 党政  职务 | |  | | |
| 最终学历学位、毕业院校 | | |  | | | | | | | | | | | | |
| 从事专业及研究方向 | | |  | | | | | | | | | | | | |
| 参加何种学术团体、任何职 | | |  | | | | | | | | | | | | |
| 申报类别 | | | □自然科学类 | | | | | □社会科学类 | | | | | | | |
| 申报等级 | | | □A类 | | | □B类 | | | | | | □C类 | | | |
| 入校以来主持的科研项目 | 项目名称 | | | | | | | 立项时间 | | 资助金额 | | | | | 立项单位 |
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| 入校以来发表的科研论文或专著 | 论文名称 | | | | | | | 发表时间 | | 期刊名称 | | | | 期刊属性 | |
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| 其他科研情况 |  | | | | | | | | | | | | | | |
| 培养期目标 |  | | | | | | | | | | | | | | |
| 部门  审核 | 申报人师德师风情况  个人年龄、学历、科研成果是否符合要求  是否同意推荐  签名： 盖章： | | | | | | | | | | | | | | |
| 科研管理办公室审核 |  | | | | | | | | | | | | | | |
| 评审组意见 |  | | | | | | | | | | | | | | |
| 备案 |  | | | | | | | | | | | | | | |