附件4

**2019年江苏省研究生工作站期满验收申请汇总表**

**高校名称（盖章）： 填报日期： 年 月 日**

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| **工作站编号**  | **设站单位名称**  | **工作站类别****（企业/非企业）**  | **设站时间**  | **是否已完成期满验收****申请（是/否）** | **是否申报省级优秀****研究生工作站（是/否）** | **备注****（未申请原因）**  |
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| **高校联系人：** |  | **联系电话：** |  | **电子信箱：** |  |
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