**附件1：**

**南京中医药大学第一届“南京健康论坛”系列学术活动申请表**

申请日期： 年 月 日

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| 申请人 | |  | | | | 所在单位 | | | |  | | | | | 学科或专业 | | |  | | | | | |
| 活动名称 | 中文 | | |  | | | | | | | | | | | | | | | | | | | |
| 英文 | | |  | | | | | | | | | | | | | | | | | | | |
| 活动主题 | |  | | | | | | | | | | | | | | | | | | | | | |
| 活动地点 | |  | | | | | | | | | | | 时间 | |  | | | | | | | | |
| 主办单位：  协办单位： | | | | | | | | | | | | | | | | | | | | | | | |
| 所属  分论坛 | |  | | | | | | | | | | | | | | | | | | | | | |
| 学术活动类别 | | □国际会议 □全国性重要会议  □国内一般性会议 □学术讲座  （请选择其中之一） | | | | | | | | | | | 会议  主席 | |  | | 职称/职务 | | | |  | |
| 活动规模（总人数） | |  | | | 港澳地区代表（人） | | | |  | | | | 台湾地区代表（人） | |  | | | | | | | |
| 外国代表人数（按国籍统计） | |  | | | | | | | | | | | | | | | | | | | | | |
| 拟邀请科学家 | | 姓名 | | 职务/职称 | | | | 学术头衔 | | | | | 专业领域 | | | | | | 工作单位 | | | | |
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| 活动筹备委员会或小组人员 | | 负责人：  成员： | | | | | | | | | | | | | | | | | | | | | |
| 联系人 | |  | | | 固话 | | |  | | | | 手机 | |  | | E-mail | | | |  | |
| 活动目的： | | | | | | | | | | | | | | | | | | | | | | | |
| 活动主题及内容： | | | | | | | | | | | | | | | | | | | | | | | |
| 活动经费 | | | 申请资助经费（万元） | | | | 经费支出明细 | | | |  | | | | | | | | | | | | |
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| 自筹经费（万元） | | | | | | | |  | | | | | | | | | | | | |
| 所在单位  意见 | | | 签名（盖章）：  年 月 日 | | | | | | | | | | | | | | | | | | | | |
| 学校意见 | | | 盖章  年 月 日 | | | | | | | | | | | | | | | | | | | | |