附件4 \_\_\_\_\_\_\_\_\_\_\_\_\_（大学）全国中医药研究生核心课程规划教材编写推荐汇总表

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| 序号 | 申报教材序号 | 申报教材名称 | 申报人 | 拟申报  职务 | 出生年月 | 性别 | 职务 | 职称 | 联系  电话 | 电子邮箱 | 二级学院（系部）、  教研室 | 通信地址（含邮政编码） | 备注 |
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联系人：\_\_\_\_\_\_\_\_ 电话：\_\_\_\_\_\_\_\_\_\_\_\_\_ 电子邮箱：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

培养单位盖章（研究生教育主管部门公章）：

填表日期： 年 月 日

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