附件6

**江苏省研究生工作站期满验收申请汇总表**

学院名称（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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