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| **长沙市第十五批农业科技特派员推荐汇总表**  **单位（校属部门公章）： 联系人： 联系电话（手机）：** | | | | | | | | | |
| **序号** | **姓名** | **政治面貌** | **电话** | **学历学位** | **职务** | **职称** | **专业** | **派出单位，注明校属部门名称** | **备注** |
| **1** |  |  |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |  |  |  |
| **7** |  |  |  |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |  |  |  |