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| 附件2: | | | | | | | | | | | |
| **首届成都医学院青年志愿服务项目大赛汇总表** | | | | | | | | | | | |
| **序号** | **学院名称** | **项目名称** | **类别** | **负责人** | **专业年级** | **联系电话** | **指导教师** | **单位部门** | **职称** | **联系电话** | **备注** |
| 1 |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |
| 学院团委意见 | （盖章） 年 月 日 | | | | | 学院党委意见 | （盖章） 年 月 日 | | | | |