**附件2：**

**福建医科大学卫生管理学院**

**第十三届公共管理案例大赛报名表**

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| 队名 | | |  | | | | | | | |
| 项  目  负  责  人 | 姓名 |  | | | 性别 |  | 出生年月 | | |  |
| 专业 | | | |  | | 年级 | | |  |
| 手机号码 | |  | | | 微信/QQ | |  | | |
| E-mail | |  | | | 指导老师 | |  | | |
| 项  目  组  成  员  **（此栏填写除项目负责人以外的其他队伍成员）** | 姓名 | | 性别 | 出生年月 | | 专业 | | | 年级 | |
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