**附件2**

**2017年南京医科大学金陵医学论坛申请表**

申请日期： 年 月 日

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| 申请单位 |  | | | | 学科或专业 | | | | | | | |  | | | | | | | | |
| 会议名称（中文） | | |  | | | | | | | | | | | | | | | | | | |
| 会议名称（英文） | | |  | | | | | | | | | | | | | | | | | | |
| 会议主题 |  | | | | | | | | | | | | | | | | | | | | |
| 会议地点 |  | | | | | | | | 会议时间 | | |  | | | | | | | | | |
| 主办单位：  协办单位： | | | | | | | | | | | | | | | | | | | | | |
| 会议层次 | □国际会议 □全国性重要会议 □国内一般性会议 □省内会议 （请选择其中之一） | | | | | | | | | | | | 会议  主席 |  | | | | 职称/职务 | |  | |
| 会议规模（总人数） |  | | | 港澳地区代表（人） |  | | | | | | | | 台湾地区代表（人） |  | | | | | | | |
| 外国代表人数（按国籍统计） |  | | | | | | | | | | | | | | | | | | | | |
| 拟邀请科学家 | 姓名 | | 职务/职称 | | | 学术头衔 | | | 专业领域 | | | | | | | | 单位 | | | | |
| \*\*\* | | 教授 | | | 院士 | | | 肿瘤 | | | | | | | | \*\*\* | | | | |
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| 拟约稿情况 | 姓名 | | 职务/职称 | | | 文章类型 | | | 文章题目 | | | | | | | | 单位 | | | | |
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| 会议筹备委员会（小组） | 负责人：  成员： | | | | | | | | | | | | | | | | | | | | |
| 联系人 |  | | | 固话 | |  | | 手机 | |  | | | | | | E-mail | | |  | |
| 举办会议的理由及目的： | | | | | | | | | | | | | | | | | | | | | |
| 会议内容： | | | | | | | | | | | | | | | | | | | | | |
| 会议预算及经费来源（注明总经费数，包括：申请资助经费额、自筹经费额等详细预算方案） | | 支出 | | | | | 校拨 | | | | 自筹 | | | | 备注 | | | | | | |
| 特邀专家差旅费 | | | | |  | | | |  | | | | 人数 | | | | | | |
| 市内交通费 | | | | |  | | | |  | | | |  | | | | | | |
| 餐费 | | | | |  | | | |  | | | | 天数、人数、标准 | | | | | | |
| 住宿费 | | | | |  | | | |  | | | | 天数、人数、标准 | | | | | | |
| 资料费 | | | | |  | | | |  | | | | 份数 | | | | | | |
| 媒体宣传费 | | | | |  | | | |  | | | | 人数 | | | | | | |
| 其他 | | | | |  | | | |  | | | |  | | | | | | |
| 合计 | | | | |  | | | |  | | | |  | | | | | | |
| 申请金额： 自筹金额： | | | | | | | | | | | | | | | | | | | |
| 学院意见 | | 签名（盖章）：  年 月 日 | | | | | | | | | | | | | | | | | | | |
| 学术委员会 意见 | | 主任委员签名：  年 月 日 | | | | | | | | | | | | | | | | | | | |
| 主管校领导意见 | | 签名：  年 月 日 | | | | | | | | | | | | | | | | | | | |

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