附件2

《厦门市减轻青年科研人员负担专项行动工作计划》修改意见建议反馈表

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 单位 | |  | 联系人 |  | | 联系电话 |  |
| 序号 | 条款 | 修改意见建议 | | | 修改理由 | | |
| 1 |  |  | | |  | | |
| 2 |  |  | | |  | | |
| 3 |  |  | | |  | | |
| 4 |  |  | | |  | | |
| 5 |  |  | | |  | | |
| 6 |  |  | | |  | | |
| 7 |  |  | | |  | | |
| 8 |  |  | | |  | | |