附件3

宜宾市2024年度市级社科专项课题申报汇总表

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| --- | --- | --- | --- | --- | --- |
| 申报单位：（盖章） 联系人： 联系电话： 申报时间： | | | | | |
| **序号** | **课题名称** | **学科分类** | **课题负责人** | **课题参与人** | **课题组联系人及联系电话** |
| 1 |  |  |  |  |  |
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