附件5：

湖州师范学院2017年家庭经济困难学生暑期社会实践项目申报汇总表

学院： （盖章）

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| **项目名称** | **团队人数** | **团队类型** | **指导老师** | **学生负责人** | **联系方式**  **（长/短号）** | **活动天数** | **活动地点** | **学生负责人**  **建行卡号** |
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