**附件2**

**首届全国西医医师学习中医系列规划教材评审委员会成员推荐表**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **姓名** | |  | **性别** |  | **出生年月** |  | **教（工）龄** |  |
| **学校** | |  | | | **职称** |  | **职务** |  |
| **手机** | |  | | | **e-mail** |  | | |
|  | **个人主要经历及成就：** | | | | | | | |
|  | **主要论著：** | | | | | | | |
|  | **对本套规划教材的意见或建议：** | | | | | | | |
|  | **单位推荐意见：**  **签字： （单位党委盖章）**  **年 月 日** | | | | | | | |