附件：

**山东省重点研发计划项目申报书**

（科技特派员行动计划）

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| **项目名称** |  |
| **申报单位（盖章）** |  |
| **项目负责人** |  |
| **主管部门** |  |
| **申报日期** |  |

**山东省科学技术厅制**

**二〇一九年**

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| 声 明  本单位所提供的项目申报材料均真实、合法、有效、无涉密信息、无知识产权权属纠纷，同一项目（包括研究内容相同或相近项目）没有重复申请，本单位愿意为此承担有关责任。同时，本单位同意管理机构委托专家进行评审、答辩和现场考察。  申报单位法人（签章） ： |
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| 一、项目基本信息表 | | | | | | | | | | | | |
| （一）单位基本情况 | | | | | | | | | | | | |
| 单位名称 |  | | | 统一社会信用代码 | |  | | 主管部门 | | |  | |
| 单位类型 | [  ] | 01.高等院校 02.科研院所 03.国有企业 04.集体企业05.私营企业  06.有限责任公司 07.股份有限公司 08.股份合作企业09.联营企业 10.其它 | | | | | | | | | | |
| 单位负责人 | 姓名 | | | | 性别 | | | | | 出生年月 | | |
|  | | | |  | | | | |  | | |
| 身份证号码 | | | | 联系电话 | | | | | 传真 | | |
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| 职工总数 | 人 | | 大专以上人员 | | | | 人 | | 研究开发人员 | | | 人 |
| 上年度销售收入 | 万元 | | 上年度研发投入 | | | | 万元 | | 拥有有效发明专利数 | | | 件 |

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| （二）项目负责人及团队基本情况 | | | | | | | | | | | | | | | | | |
| 项目负责人 | | | | 姓名 | | | | | | | | 性别 | | | | 科技特派员编号 | |
|  | | | | | | | |  | | | |  | |
| 身份证号码 | | | | | | | | 联系电话 | | | | 传真 | |
|  | | | | | | | |  | | | |  | |
| 工作单位 | | | | | | | | 职称/职务 | | | | 从事专业 | |
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| 项目主要参加人员情况 | | | | | | | | | | | | | | | | | |
| 姓名 | | 性别 | | | | | 出生年月 | | 职称/职务 | 科技特派员编号 | | 工作单位 | | | 项目中分工 | | 参加  月/年 |
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| 二、项目主要内容 | | | | | | | | | | | | | | | | | |
| 项目起始时间 | | | | | | |  | | | 计划完成时间 | | |  | | | | |
| 所属领域 | | [  ] 1.设施蔬菜种植2.林果高效栽培3.畜牧健康养殖4.中药材标准化种植5.农产品精深加工6.农业废弃物综合利用7.食用菌栽培8.病虫害防治9.智能农机装备10.水肥一体化 | | | | | | | | | | | | | | | |
| 成果来源 | | | | [ ] 1.自主研发 2.有偿转让 3.国内合作 4.国外引进与合作 5.其他 | | | | | | | | | | | | | |
| 项目计划总投资 | | | | | | | 万元 | | | 其中已完成投资 | | | 万元 | | | | |
| 项目申请经费  （万元） | | | | | 申请省财政科技经费额度单 | | | | |  | | | | | | | |
| 单位自筹金额 | | | | |  | | | | | | | |
| 经费支出预算（万元） | | | | | 资金支出预算 | | | | | 金额 | | 其中：省财政科技经费支出金额 | | | | | |
| 1.设备费 | | | | |  | |  | | | | | |
| 2.材料费 | | | | |  | |  | | | | | |
| 3.测试化验加工费 | | | | |  | |  | | | | | |
| 4.燃料动力费 | | | | |  | |  | | | | | |
| 5.差旅费/会议费/国际合作与交流费 | | | | |  | |  | | | | | |
| 6.出版/文献/信息传播/知识产权事务费 | | | | |  | |  | | | | | |
| 7.劳务费 | | | | |  | |  | | | | | |
| 8.专家咨询费 | | | | |  | |  | | | | | |
| 9.间接费用 | | | | |  | |  | | | | | |
| 10.其他费用 | | | | |  | |  | | | | | |
| 合计 | | | | |  | |  | | | | | |
| 项目经费预算简要说明： | | | | | | | | | | | | | | | | | |
| 1. **项目主要内容（不超过300字）** | | | | | | | | | | | | | | | | | |
| **（二）项目考核指标（不超过500字）** | | | | | | | | | | | | | | | | | |
| **（三）项目实施进度安排（不超过300字）** | | | | | | | | | | | | | | | | | |
| **（四）项目预期经济社会效益** | | | | | | | | | | | | | | | | | |

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| **（五）结对帮扶省定扶贫工作重点村情况**   |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | 序号 | 市 | 县 | 乡镇（办事处） | 村 | 户数 | 人口数 | 特色产业 | 联系人 | 联系电话 | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |   **（六）拟培养科技致富带头人、基层科技人才名单**   |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | 序号 | 市 | 县 | 乡镇（办事处） | 村 | 姓名 | 产业 | 联系电话 | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |   **（七）在扶贫工作重点村完善提升或新建农科驿站**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | 农科驿站名称 | 新建或完善提升 | 运营主体 | 主要服务内容 | 联系人 | 联系方式 | |  |  |  |  |  |  |   **三、单位和管理（主管）部门推荐意见** |
| **单位意见**：（申请书所填写的内容是否属实；该项目负责人和参加者的政治业务素质是否适合承担本项目的成果转化工作；本单位能否提供完成本项目所需的时间和条件；本单位是否同意承担本项目的管理任务和信誉保证；是否同意报送。） |
|  |
| 单位负责人签字：  （单位公章） |
| 年  月  日 |
| **管理部门(县\区科技局)意见**：（需说明是否经过审核，材料是否真实，是否同意申报） |
|  |
| 负责人签字：  单位公章 |
| 年  月  日 |
|  |
| **主管部门(市科技局)意见**  负责人签字： 单位公章  年 月 日 |
| 四、相关附件 | |
| （包括项目申报人的学历、学位及申报人为主所取得的专利、成果、重要获奖、产学研合作协议等复印件，项目承担单位需提供企业法人营业执照等复印件）。 | |