附件二

“尖兵”“领雁”研发攻关计划项目推荐汇总表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 榜单类型： □“尖兵计划”榜单 □“领雁计划”榜单 □其他类（重大社会公益等）榜单 | | | | | | | | | | | | | | | | | |
| **序号** | **榜单名称** | **项目名称** | | | **申报单位** | | **项目负责人姓名** | | **身份证号码** | | **项目**  **总经费**  **（万元）** | | **申请财政经费（万元）** | | **组织方式**  **1.择优委托**  **2.竞争性分配**  **3.悬赏制** | **碳达峰碳中和（是/否）** | **备注** |
| 1 |  |  | | |  | |  | |  | |  | |  | |  |  |  |
| 2 |  |  | | |  | |  | |  | |  | |  | |  |  |  |
| 3 |  |  | | |  | |  | |  | |  | |  | |  |  |  |
| 4 |  |  | | |  | |  | |  | |  | |  | |  |  |  |
| 5 |  |  | | |  | |  | |  | |  | |  | |  |  |  |
| 推荐单位：（盖章） | | |  |  | | 联系人： | |  | |  | | 手机： | |

注：择优推荐应结合新型实验室体系、技术创新中心体系、科创大走廊、国家自主创新示范区、国家和省级高新园区、省级高新技术特色小镇等省级以上高能级创新平台配置创新资源，请在“备注”栏注明平台名称。