附件6

志愿者行动先进集体推荐汇总表

二级学院团总支盖章： 负责人签字：

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **集体名称** | **服务总时长** | **人均服务时长** | **负责人及联系方式** | **备注**  **（校级、院级）** |
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**备注：学生组织无需盖章，负责人签名处由指导老师签名。**