附件4

\*\*\*\*（学院、系、所、重点实验室）科研实验室安全管理体系

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| **科研实验室安全工作领导小组** | | | | | | | | | |
| 组长：  副组长：  成员： | | | | | | | | | |
| **科研实验室安全管理体系办公室** | | | | | | | | | |
| 负责人 | | |  | | 电话 | | |  | |
| 安全联系人员 | | |  | | 电话 | | |  | |
| **科研实验室安全管理体系信息** | | | | | | | | | |
| **序号** | **房间号** | **实验室名称** | | **安全负责人** | | **电话** | **手机** | | **备注** |
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填报人： 单位盖章： 单位领导（签字）：