**附件5：**

**三明学院各二级学院、部门安全隐患排查整改台帐**

**填报单位（盖章）： 领导（签名）： 时间：**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 隐患位置 | 隐 患 内 容 | 排查时间 | 整 改责任人 | 隐患整改结果 | 未能整改原 因 | 是否上报学校解决 |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |