附件

参训学员推荐汇总表

培训班名称： 填报单位： 审 核 ：

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| 序号 | 姓名 | 身份证 | 手机号 | 民族 | 性别 | 学历 | 工作单位或家庭住址(具体到乡镇街道) | 户籍 地省 | 户籍 地市 | 户籍地 县(区) | 所属县(区) | 是否 住宿 |
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