附件：

**报 名 回 执 表**

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| **单位名称** |  |
| **通讯地址** |  |
| **联 系 人** |  | **电话** |  | **E-mail** |  |
| **姓名** | **性别** | **身份证号** | **学历/专业** | **职称/评审时间** | **手机** |
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注:请填写报名回执表发至邮箱：1327604847@qq.com

联系人：胡敏 郑思杰 联系电话：028-86702763