附件5

 班参训学员名单汇总表

 **地市（单位）： （盖章） 联系人： 联系电话：**

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| **序号** | **姓名** | **性别** | **出生年月** | **民族** | **政治****面貌** | **身份证号** | **职务** | **工作单位** | **联系方式** | **备注** |
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