附件

2022年企业标准化人员线上公益培训班报名回执表

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| 市州/单位名称 |  | | | |
| 联系人 |  | | 职务 |  |
| 手机 |  | | | |
| 参训人员姓名 | 性别 | 单位名称 | 职称/职务 | 手机号码 |
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