附件

2025年江苏省运动防护师岗位培训报名登记表

填报单位：（盖章）

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| 序号 | 单 位 | 姓 名 | 性  别 | 身份证号码 | 学历 | 出生  年月 | 现  专业职称 | 任  现职时间 | 申报  何职称  等级培训 | 联系电话 | 备注 |
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