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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