附件3：

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| **2017年滁州市高校教师岗前培训人员登记表** | | | | | | | | |
| **学校（盖章）:** | | | | |  | **部门：** | | |
| **序号** | **姓名** | **性别** | **出生**  **年月** | | **毕业学校、专业** | **学历** | **联系方式** | **备注** |
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| **说明：请各参训学校在备注注明本次培训人员的负责人** | | | | | | | | |
| **学校联系人：** | | | | **学校联系电话：** | | | | |