**省直机关职工技能比赛参赛选手登记表**

**赛别：**

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| 姓 名 |  | 性别 | | |  | | 年龄 | |  | 免  冠  照 |
| 身份证号 |  | | | | | | | | |
| 文化程度 |  | | 职务级别 | | |  | | | |
| 单 位 |  | | | | | | | | |
| 通信地址 |  | | | | | | | | |
| 邮 编 |  | | | 手机号码 | | | |  | | |
| 个人工作、学习简历 | | | | | | | | | | |
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| 推荐单位意见：  （盖章）  2020年 月 日 | | | | | | | | | | |

注: 1.身份证、单位工作证（或人事关系证明）做成PDF件附后；

2.电子档随表报指定邮箱。