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| 附件2   重庆市职业教育教科研项目评审人选推荐汇总表 | | | | | | | | | | | |
| 推荐单位（盖章）： 联系人： 电话： 填表时间： | | | | | | | | | | | |
| 姓 名 | 性别 | 出生年月 | 工作单位 | 职称/职务 | 学科方向 | 研究专长 | 评审组别 | 联系电话 | 通信地址 | 电子邮箱 | 备注 |
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