附件2：

第十四届驻济高校单身教职工、省教育厅

单身干部职工联谊活动报名汇总表

单位： 联系人： 联系电话：

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| 姓名 | 性别 | 出生年月 | 籍贯 | 身高 | 学历 | 职务、职称 | 邮箱 | 微信号 | QQ号 |
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