**2020年建设领域施工现场专业技术人员职业培训报名汇总表**

企业名称 时间：20 年 月 日

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 序号 | 姓名 | 性别 | 年龄 | 身份证号 | 学历 | 所学专业 | 从事本岗位工作年限 | 报考岗位 | 联系电话 | 工作单位 |
| 1 |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |
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| 12 |  |  |  |  |  |  |  |  |  |  |
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| 14 |  |  |  |  |  |  |  |  |  |  |
| 15 |  |  |  |  |  |  |  |  |  |  |
| 16 |  |  |  |  |  |  |  |  |  |  |
| 17 |  |  |  |  |  |  |  |  |  |  |
| 18 |  |  |  |  |  |  |  |  |  |  |
| 开票信息 | |  | | | | | | | | |

备注：请务必认真填写表中各项信息，确保信息准确无误。