附件2

2017年南沙区职工职业技能竞赛选手报名汇总表（保育员）

报送单位（盖章）： 联系人： 联系电话：

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 序号 | 姓 名 | 性别 | 文化程度 | 身份证号码 | 从事保育员行业工龄 | 现有职业资格等级 | 是否需要办理职业资格证书 | 所在单位 | 联系电话 | 备注 |
| 1 |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |
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