附件2

机械行业技工院校工学一体化教学能力比赛报名汇总表

**单位名称（盖章）： 单位联系人： 联系电话：**

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| **序号** | **拟参加竞赛专业** | **参赛选手** | **联系电话** | **微信号** | **电子邮箱** | **备注** |
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