附件1

**参训学员报名回执**

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| 序号 | 姓名 | 性别 | 工作单位 | 职务 | 参加培训时间及科目 | 手机 | QQ号 |
| 1 |  |  |  |  |  |  |  |
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**备注：请加入2018年社会工作师考前培训QQ群725059526**