附件3核酸检测相关人员项目制培训人员花名册

承训单位（盖章）：

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| 培训  项目 | 序号 | 姓名 | 性别 | 身份  证号 | 单位 | 持有证  书情况 | 培训  时长 | 联系  电话 | 备注 |
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