应急救援实训指导师学员报名表

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| **姓名** |  | | | 照片(1寸) |
| **身份证号** |  | | |
| **性别** |  | | |
| **出生日期** |  | | |
| **最高学历** |  | **电子邮箱** | |  |
| **毕业学校** |  | **联系电话** | |  |
| **职务/职称** |  | **职业资格等级** | |  |
| **工作单位** |  | **参加工作时间** | |  |
| **通讯地址** |  | | | |
| **实训指导专业/职业** |  | | | |
| **实训指导经历** | | | | |
| **起止年月** | **单位名称及职务/职称** | | **主要工作内容** | |
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