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| **附件：** | | |  |  |  | |  |  | |  |
| **校外学习中心参会人员回执** | | | | | | | | | | |
| 序号 | 校外学习中心 | 姓名 | | 性别 | | 职务 | 手机 | 到达时间 | 离开时间 | |
| 1 |  |  | |  | |  |  |  |  | |
| 2 |  |  | |  | |  |  |  |  | |

**注：参会人员超过学院指定人数或需要单间的费用自理。**