附件2

2024年广州市第十届产业人员职业技能竞赛—客户服务管理员项目报名汇总表

填报企业（盖章） 年 月 日

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| **序号** | **姓名** | **性别** | **工作部门** | **身份证号** | **手机号** | **备注** |
| 1 |  |  |  |  |  | 领队 |
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