附件4

宁波市企业人员攻读研究生学费补贴申报汇总表

汇总单位： 填报人： 联系电话： 填报时间： 年 月 日

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| 序号 | 姓名 | 性别 | 单位 | 工作岗位 | 报考学校 | 报考专业 | 联系方式 | 身份证号 |
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注：请制成EXEL表格