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| 附件2： | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 百色市应急管理局直属事业单位公开选调报考人员基本情况表 | | | | | | | | | | | | | | | | | | | | |
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| **序号** | **姓名** | **现 任 职 务** | **性 别** | **出生 年月** | **民 族** | **籍 贯** | **出生地** | **参加 工作 时间** | **入党 时间** | **全日制教育** | | **在职教育** | | **任现职 时 间** | **任级别时间** | **是否有服务期限** | **身份证号码** | **联系 电话** | **通信 邮箱** | **备注** |
| **学历 学位** | **毕业院校 及 专 业** | **学历 学位** | **毕业院校 及专业** |
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