附件6

2019年对口单招报名点联系人情况表

市(盖章) 制表人： 联系电话：

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| 序号 | 报名点  代码 | 报名点名称 | 报名点负责人姓名 | 职务 | 负责人电话 | 负责人手机 | 联系人姓名 | 联系人电话 | 联系人手机 |
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注：本表以纸质盖章扫描件与EXCEL电子表格形式于10月25日前报送省教育考试院。