附件5

优秀实践个人申报表

单位（公章）： 填表人： 联系电话：

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| --- | --- | --- | --- | --- | --- | --- |
| **序号** | **姓名** | **性别** | **出生年月** | **所在部门/学院** | **职务、职称/年级、专业** | **主要事迹（300字以内）** |
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