附件3
输送（推荐、派遣）毕业生花名册

申报单位名称（盖章）： 申报时间： 年 月 日

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| 序号 | 姓名 | 性别 | 身份证号码 | 毕业院校 | 专业 | 参保单位名称 | 社保缴纳情况 | 备注 |
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经办人： 手机：