2024年嘉定籍优秀大学生暑期实践锻炼报名情况汇总表

团组织（盖章）

联系人： 联系电话：

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| **序号** | **姓名** | **性别** | **民族** | **籍贯** | **政治**  **面貌** | **所在院系及专业** | **年级** | **学制** | **手机** | **家庭地址** | **所属**  **街镇** | **身份证**  **号码** |
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