**附件2:**

**河南省人民医院2022年神经外科专科护士培训班学员信息登记表**

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| **序号** | **工作单位** | **姓名** | **性别** | **年龄** | **职务** | **职称** | **政治**  **面貌** | **原工作科室** | **执业证号** | **工作年限** | **联系方式 （本人手机）** | **身份证号** | **备注** |
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