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| 附件2福建省专业技术人员高研班项目计划汇总表省直主管单位或设区市人社部门(章盖)： 填表日期： |
| **序号** | **研修选题** | **承办单位** | **主管部门或申报单位** | **联系人** | **联系电话** | **所属领域** | **学员人数** |
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