附件1

                 用人单位参会报名表

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| 单位名称  （盖章） |  | | | | | | | | | |
| 通讯地址 |  | | | | | | | | 邮编 |  |
| 电邮或QQ |  | | | | | 联系人 | |  | | |
| 固定电话 |  | | | | | 手机 | |  | | |
| 单位简介（500字之内） | | | | | | | | | | |
|  | | | | | | | | | | |
| 招聘信息 | | | | | | | | | | |
| 需求职位 | | 学历 | 专业 | 性别 | 人数 | | 其他要求 | | | |
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| 备  注 | |  | | | | | | | | |