附件

云南省2021年青少年科技辅导员专业水平认证州市汇总确认表

州（市）： （盖章）

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| **序号** | **姓名** | **性别** | **工作单位** | **职称/职务** | **专业** | **申报级别** | **备注** |
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注：本表可自行添加