**附件1：**

重庆电信职业学院

2025届毕业生秋季校园双选会参会回执

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| 单位名称 | |  | | | | | | | |
| 单位地址 | |  | | | | | | | |
| 联系人员 | |  | | | | 联系电话 |  | | |
| 是否需要当天组织专场招聘会： | | | | | | | | | |
| 拟招聘人员情况 | | | | | | | | | |
| 职 位 | | 毕业生专业 | | 人数 | | 相 关 要 求 | | | |
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| 拟参会人员情况 | | | | | | | | | |
| 姓 名 | 性别 别 | | 所在部门门 | 职务 | 拟到校时间 | | | 联系电话 | 备注 注 |
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2024年 月 日