附件3

中小学教师人工智能素养提升省级示范性培训班

学员报名汇总表

填报单位（盖章）：

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| 序号 | 姓名 | 性别 | 工作单位 | 职务 | 联系电话 | 备注 |
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备注：根据名额分配情况可另附页填写