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| **附件二：2017届毕业生就业双选会回执单** | | | | | | | | | | |
| 单位名称 | |  | | | | | 联系邮箱 | |  | |
| 通讯地址 | |  | | | | | 邮政编码 | |  | |
| 参会人员 | | 姓名 | | 性别 | 职务 | | | 办公电话 | | 手机号 |
|  | |  |  | | |  | |  |
|  | |  |  | | |  | |  |
| **单**  **位**  **简**  **介** | (500字以内) | | | | | | | | | |
| **招**  **聘**  **职**  **位** | **招聘岗位** | | **招聘人数** | | | **岗位要求** | | | | |
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注：请将“回执单”于2016年11月14日前发到932729878@qq.com 邮箱