附件2

海南省职业病防治工程技术专家汇总表

填报单位（公章）：

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| 序号 | 姓名 | 性别 | 工作单位 | 工作单  位类别 | 职务  /职称 | 学历 | 现从事行业、专业 | 从事相关工作年限 | 推荐专家类别 | 推荐行业、  专业 | 联系电话 | 电子邮箱 |
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填表人： 联系电话： 邮箱：