附件4

山东省内高校参会人员信息收集表

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| **序号** | **学校** | **姓名** | **手机号** | **身份证号** | **邮箱** | **职务** | **参观日期(明确至上、下午，如5.21上午、5.22全天、5.22下午、5.23上午；若全程参与，请填写全程）** |
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注：同一参会人员可以参加多个时段活动。