附件

引凤还巢培养计划“师带徒”需求表

填报单位：

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| **序号** | **项目名称** | **法人姓名** | **联系电话** | **指导****内容** | **指导****方式** | **备注** |
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**注：**指导方式填网络培训、电话咨询、集中培训、现场专家指导等。