**附件**

2024年度专业技术人员高级研修项目计划表

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| **序号** | **项目名称** | **培训对象** | **培训期数** | **培训人数** | **培训地点** | **经费（拨款或自筹）** | **申报单位** | **联系人** | **电话** | **是否是基地** |
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申报单位： 联系人： 联系电话：