附件2

青海大学2020年藏医学（中职升高职）

考试报名登记表

学校盖章： 填制日期：

联系人： 联系方式：

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 序号 | 姓名 | 性别 | 民族 | 身份证号 | 联系方式 | 入学年份 | 所学专业 | 是否通过资格审查 |
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