附件2

**首届危险货物道路运输驾驶员应急技能竞赛
推荐表**

推荐单位（章）：

联系人及联系电话：

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| 序号 | 姓名 | 性别 | 年龄 | 民族 | 工作单位 | 文化程度 | 从业年限 | 联系电话 |
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