附件：

**潍 坊 医 学 院 校 园 招 聘 会 会 议 回 执**

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| --- | --- | --- | --- | --- | --- | --- |
| 单位名称 | |  | | | 单位主页网址 |  |
| 联系部门 | |  | | | 固定电话 |  |
| 联 系 人 | |  | | | 移动电话 |  |
| 通信地址 | |  | | | | |
| 邮箱 | |  | | | | |
| 参加人数 | |  | | | | |
| **需 求 信 息** | | | | | | |
| 序号 | 需求专业 | | 需求人数 | 需求条件 | | |
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