附件4

2025—2026学年兵团银龄讲学计划招募讲学教师花名册

填报单位（盖章）: 填报人： 电话： 填报日期： 年 月 日

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| 序号 | 姓名 | 性别 | 民族 | 身份证号 | 年龄 | 专业技术职务 | 手机号码 | 讲学教师来源 （退休前单位） | 受援地 | 任教学段科目 | 备注 |
| 省 | 地市/师 | 区县、团场 | 学校 | 师市 | 团场 | 学校 |
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