**办理“多媒体教室设备领用卡”登记表**

**二级学院（部）：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_（盖章） 年 月 日**

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| **序号** | **姓名** | **性别** | **工号** | **手机号** | **1寸照片电子版（JPG格式）** | **备注** |
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