附件：

**遴选代记账团队申请表**

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| **团队基本情况** | **团队名称** |  | | | | | | | | | | | | |
| **团队人数** |  | | | | | | | | | | | | |
| **负责人**  **简介** | **姓 名** |  | | **性 别** | |  | | **出生年月** | |  | | **学 历** | |  |
| **毕业院校及专业** | |  | | | | | | | | **毕业时间** | |  | |
| **联系电话** | |  | | | | **邮 箱** | | | |  | | | |
| **成员** | **姓名** | | **性别** | | **出生年月** | | **毕业时间** | | **学 历** | | **毕业院校** | | | |
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| **团队（个人）**  **简历** |  | | | | | | | | | | | | | |