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| **附件2** |  |  |  |  |  |
| **安康市就业见习单位和岗位汇总表** | | | | | |
|
| **序号** | **单位名称** | **申报 人数** | **专业要求** | **联系人** | **联系电话** |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |
| 11 |  |  |  |  |  |
| 12 |  |  |  |  |  |