**附件六：**

 ICDL教师数字素养技能挑战赛报名表（教师组）

学校： 学校负责人: 联系电话:

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| **序号** | **教师姓名** | **教师姓名（拼音）** | **出生日期** | **性别** | **联系电话** | **邮箱** |
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