附件

四川文理学院2022年教职工适龄子女基础教育入学意向汇总表

二级单位（签章）： 填报人： 联系方式：

|  |  |  |  |  |  |  |  |  |  |
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| **序号** | **家长（本校教职工）姓名** | **父亲（母亲）姓名** | **出生年月** | **子女姓名** | **性别** | **意向学校** | **子女户口所在地** | **父母房屋所在地（含租房）** | **联系电话** |
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