附件2：实验室气体安全管理与使用讲座参会回执

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| 序号 | 学院/单位名称 | 课题组名称 | 姓名 | 参会方式**（线下/线上）** |
| 例 | 基础医学院 | XX课题组 | 胡XX | 线下参会 |
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