附件1

全省教育系统新冠肺炎防控情况登记表

填报单位： 时间：2020年2月11日

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| **姓 名** | **身份** | **班级或****部门、****教研室** | **身份证号** | **手机号** | **来自疫情防控重点区域（武汉、湖北）** | **到过疫情防控重点区域****或与重点区域人员有接触** | **被确诊或留观的人员** |
| **教职工** | **学生** | **餐饮****或物业****或保安** | **时间** | **现重点区域地址** | **时间** | **到过重点区域地址** | **与重点区域人员有接触** | **确诊** | **疑似** | **留观** |
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