**附件3：**

 年 月

特种设备作业人员考试信息汇总表

考试机构：

联系人： 联系电话：

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 序号 | 受理决定书的文号 | 考试日期 | 考试批次 | 姓名 | 身份证号码 | 考试项目 | 成绩 | 是否合格 | 是否补考 | 备注 |
| 理论 | 实操 |
| 1 |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |
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| 7 |  |  |  |  |  |  |  |  |  |  |  |
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