附件2

扫黑除恶专项斗争应知应会第二轮测试成绩汇总表

单位： 测试时间： 填表人：

|  |  |  |  |
| --- | --- | --- | --- |
| 姓名 | 职务 | 成绩 | 备注 |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| 单位总人数 |  | 实际参考人数 |  |