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|  <p>SERVIZIO SANITARIO REGIONALE Dipartimento Tutela della Salute e Politiche Sanitarie</p> <p>AZIENDA SANITARIA PROVINCIALE REGGIO CALABRIA</p> <p>AZIENDA SANITARIA PROVINCIALE REGGIO CALABRIA</p> | <h1>COMUNICAZIONE ASSUNZIONE DIPENDENTE</h1> | <p>Modello Q</p> <p>Pag. 1/1</p> |
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Si comunica alla U.O.C. Sistemi Informativi l'assunzione del seguente dipendente:

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| RAPPORTO DI LAVORO: | <input type="checkbox"/> TEMPO INDETERMINATO <input type="checkbox"/> TEMPO DETERMINATO CON SCADENZA IL _____ | | | | | | | | | | | | | | | | | | | | |
| DATA PRESA SERVIZIO: | _____ | | | | | | | | | | | | | | | | | | | | |

Data _____

**Il Responsabile del Procedimento
(Timbro e Firma)**
