附件

培训回执表

填报单位：

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 姓名 | 性别 | 单位 | 职务/职称 | 手机号码 | 是否  单间 |
|  |  |  |  |  |  |
|  |  |  |  |  |  |