附件2

培训人员报名回执表

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **市** | **姓名** | **性别** | **身份证号** | **单位全称（同发票）** | **单位税号** | **职务** | **手机号码** |
| 1 |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |

备注: 1.因名额限制，请参训人员务必提前致电沟通，以交费为报名确认标准。

2. 请参训学员每人准备一张一寸彩照（25mm\*35mm）电子版,随报名回执表一并发到报名邮箱，以便制作结业证书。