附件

培训报名回执表

申请人所在单位（盖章）： 年 月 日

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| 工作单位 | |  | | | 通讯地址 |  | | |
| 序号 | 姓名 | | 身份证号 | | | 联系电话 |  | 备注 |
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| 其他培训需求与建议 | | | | | | | | |
| 年 月 日 | | | | |
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说明：1.填写时字体要工整；

2.报到时请携带标准**1寸**彩色免冠照片1张。