**附件**

**高端装备技术技能人才师资能力培训班报名回执表**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 单位名称 |  | | | | | | | | | | |
| 通讯地址 |  | | | | 邮编 | | |  | | | |
| 联系人 |  | | 电话 | |  | | | 职务 | |  | |
| 邮箱 |  | | 人数 | |  | | | 期数 | |  | |
| 使用软件 |  | | | | | | | | | | |
| 开票信息 | | | | | | | | | | | |
| 单位名称 |  | | | | | | | | | | |
| 税号 |  | | | | | | | | | | |
| 开户行 |  | | | | | | | | | | |
| 银行账户 |  | | | | | | | | | | |
| 地址、电话 |  | | | | | | | | | | |
| 参加培训人员信息 | | | | | | | | | | | |
| 姓名 | 性别 | 联系方式 | 邮箱 | | | 身份证号码 | | | 是否清 真饮食 | | 是否单住 |
| (可添行) |  |  |  | | |  | | | 是□否□ | | 是□否□ |
|  |  |  |  | | |  | | | 是□否□ | | 是□否□ |
|  |  |  |  | | |  | | |  | |  |
| 发票邮寄地址 | | | | | | | | | | | |
| 收件人 |  | | | 联系电话 | | |  | | | | |
| 邮寄地址 |  | | | | | | | | | | |
| 备注 |  | | | | | | | | | | |