附件2

职业技术经理人培训班报名回执

说明：为保证您更好的学习体验，请认真填写报名回执，所填信息仅用于当期会务安排。

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| 单位名称 | |  | | | | | | 纳税人识别号 |  | | | | | | |
| 培训联系人 | |  | | 手机 | |  | | 邮箱 |  | | | | | | |
| 通讯地址 | | *（邮寄证书用）* | | | | | | | | | | | | | |
| 参加人员信息 | | | | | | | | | 课程学习（确定参加填“1”） | | | 住宿登记（确认住宿填“1”） | | | |
| 姓名 | 性别 | | 职务 | | 手机 | | 邮箱 | | T1  (10.20-23) | T2  (11.24-27) | T3  (12.9-12) | T1  (10.20-23) | T2  (11.24-27) | T3  (12.9-12) | 备注 |
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