附件：

报名回执表

单位名称： 单位联络人：

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **姓名** | **性别** | **身份证号码** | **文化程度** | **联系方式** | **报考****级别** | **备注****（是否有相应证书）** |
| 1 |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |
| … |  |  |  |  |  |  |  |

注：请于2月28日（周五）前发送至邮箱495904981@qq.com。