附件2

培训报名汇总表

填报单位： 填表人:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 姓名 | 性别 | 工作单位 | 联系电话 | 备注 |
|  |  |  |  | 线上/线下 |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| • •• |  |  |  |  |