附件

**科研能力提升培训班参训回执表**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **序号** | **姓 名** | **工作单位及职务职称** | **手机号码** | **是否参加过前几届****培训班** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **推荐单位联系人** |  | **单位盖章** |
| **联系电话** |  |