|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 附件1： | | | | | | |
| 参加消防应急专业培训人员报名回执表 | | | | | | |
| **（第一期）** | | | | | | |
| 单位名称 | |  | | | | |
| 通讯地址 | |  | | | | |
| 参加培训人员名单 | | | | | | |
| 序号 | 姓名 | | 性别 | 职务 | 手机号码 | 备注 |
| 1 |  | |  |  |  |  |
| 2 |  | |  |  |  |  |
| 3 |  | |  |  |  |  |
| 4 |  | |  |  |  |  |
| 5 |  | |  |  |  |  |
| 6 |  | |  |  |  |  |
| 7 |  | |  |  |  |  |
| 8 |  | |  |  |  |  |
| 9 |  | |  |  |  |  |
| 10 |  | |  |  |  |  |
| 11 |  | |  |  |  |  |
| 12 |  | |  |  |  |  |
| 说明：第二期回执表同第一期。 | | | | | | |

填报人：联系电话：