**2019年福建省电池行业技术人员高级研修班**

**学员报名表**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **单 位** |  | | | | | | |
| **地 址** |  | | | | | **邮政编码** |  |
| **学员姓名** | **职务/职称** | **学历** | **所学专业** | **现从事工作** | **从事专业**  **年限** | **电话** | **E-mail** |
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| **其它说明：** | | | | | | | |

**注：请认真填写回执，并通过e-mail或传真发送给研修班联络组：**

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