附件

参会回执

|  |  |
| --- | --- |
| 学院 |  |
| 姓名 | 性别 | 职务 | 学历 | 身份证号 | 联系电话 |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |