附件：

**《质量信得过班组相关知识培训》报名回执表**

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| 单位名称 | |  | | | |
| 联系人 | |  | | 电话 |  |
| 参  加  人  员 | 姓名 | 性别 | 部门及职务 | 联系电话 | |
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