**附件：**

**无人机海洋应用培训班回执**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 单位名称 | |  | | | | | | | | | | | | | | | |
| 发票抬头及纳税识别号 | | （重要！开具发票用） | | | | | | | | | | | | | | | |
| 汇款时间 | |  | | | | | | | | | | | | | | | |
| 培训人员名单 | | | | | | | | | | | | | | | | | |
| 姓 名 |  | | 性别 | | | | | |  | | 职务 | | | |  | | |
| 联系方式 | 手机： E-mail： | | | | | | | | | | | | | | | | |
| 姓 名 |  | | | 性别 | | | |  | | | | 职务 | | | |  | |
| 联系方式 | 手机： E-mail： | | | | | | | | | | | | | | | | |
| 姓 名 |  | | | | 性别 | | | | |  | | | 职务 | | | |  |
| 联系方式 | 手机： E-mail： | | | | | | | | | | | | | | | | |
| 姓 名 |  | | | | 性别 | | | | |  | | | 职务 | | |  | |
| 联系方式 | 手机： E-mail： | | | | | | | | | | | | | | | | |
| 姓 名 |  | | | | 性别 | | |  | | | | | | 职务 | | |  |
| 联系方式 | 手机： E-mail： | | | | | | | | | | | | | | | | |
| 姓 名 |  | | | | | | 性别 | | |  | | | 职务 | | | |  |
| 联系方式 | 手机： E-mail： | | | | | | | | | | | | | | | | |
| 预定房间数 |  | | | | | 预计离会时间 | | | | | | | | |  | | |
| 备 注 |  | | | | | | | | | | | | | | | | |

**注：请各单位务必于4月7日前将培训回执电邮至承办单位邮箱hyjypx@ouc.edu.cn。**