|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 单位名称 |  | | | | | | | | |
| 单位主要产品 |  | | | | 产品工艺 | |  | | |
| 设计面临的挑战 |  | | | | 关心哪方面新技术 | |  | | |
| **联 络 人 信 息** | | | | | | | | | |
| 姓名 |  | | 部门 |  | | 职务 | |  | |
| Email |  | | 电话 |  | | 手机 | |  | |
| **参加人员信息（以下信息请填写完整）** | | | | | | | | | |
| 姓名 | 部门 | 职务  职称 | 电话（手机） | Email | | | | 身份证号码 | 从事相关行业工作年限 |
|  |  |  |  |  | | | |  |  |
|  |  |  |  |  | | | |  |  |
|  |  |  |  |  | | | |  |  |
|  |  |  |  |  | | | |  |  |
|  |  |  |  |  | | | |  |  |
| 希望在培训中交流的问题（您的建议）： | | | | | | | | | |
| 其他需求： | | | | | | | | | |

附件：报名回执