**附件2：**

**“科技成果转化与科技产业发展培训班”报名表**

经研究，选派下列同志参加学习：

|  |  |
| --- | --- |
| 单位名称 |  |
| 联 系 人 |  | 手 机 |  |
|  |
| 姓 名 | 性别 | 职 务 | 单位名称 |  手 机 | 参加期次 |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

联 系 人：程悦超

报名电话：0371－65756801