**附件：**

第二期送电专业设计人员（国遥平台）培训班预报名回执表

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| 单位名称:  地 址： 邮编： | | | | | | | |
| 联系人姓名： 手机： 单位电话： 传真: | | | | | | | |
| **序号** | **姓 名** | **性别** | **职务（职称）** | **专业** | **手机** | **住宿要求** | |
| **单住** | **合住** |
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**注：请在住宿要求栏内打“√”。**