附件2

线下参训人员名单

单位名称：

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 序号 | 单位 | 姓名 | 职务 | 联系方式 | 备注 |
| 1 |  |  |  |  | 带队负责人 |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |
| 温馨提示：工作人员在乌鲁木齐市的参训人员，如有停车需求，可在备注栏备注车牌号。 | | | | | |