**深圳市公共环境消毒清洁高级技能培训班**

**学员报名表**

**专业 ：消毒清洁高级技能培训 第 期 报名时间： 年 月 日**

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| **姓 名** | |  | | | | **性 别** | |  | **民 族** | |  | | | **学历** |  | | **照 片** | | |
| **出生年月** | |  | | | | **职 务** | |  | **座机** | |  | | | | | |
| **工作单位** | |  | | | | | | | | | | | | | | |
| **通讯地址** | |  | | | | | | | **单位固话** | |  | | | | | |
| **邮 编** | |  | | | **手机** | |  | | | **交款方式** | |  | | | | **交款时间** | | |  |
| **身份证号码** | |  | | | | | | | **E-mail** | |  | | | | **QQ号码** | | |  | |
| **培 训 经 历** | **培 训 时 间** | | | **培 训 地 点** | | | | | **培 训 内 容** | | | | **获 得 证 书** | | | | | | |
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| **工 作 经 历** | **工 作 时 间** | | | **工 作 单 位** | | | | | **就 职 部 门** | | | | **职 务** | | | | | | |
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| **备 注** | | | **培训证编号：（协会发放时填写）** | | | | | | | | | | | | | | | | |

**备注**： **1**、请附上本人身份证复印件+小一寸照片三张（背后写上名字，报名表贴一张照片，其余另附）。

1. 请在报名表和身份证复印件盖上单位公章。
2. 请发一份报名人员汇总信息电子版文档给协会。

**深圳市消毒清洁行业协会制**