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| **职业技能等级认定报名回执表** | | | | | | | | | | | | | |
| **考生信息** | | | | | | | | | | | | | |
| **序号** | **姓名** | **性别** | **身份证号** | | **文化程度** | **联系方式** | | **单位名称** | | **职务** | **报考工种及级别（五级、四级，三级）** | | **备注（是否有相应证书）** |
|
| 1 |  |  |  | |  |  | |  | |  |  | |  |
| 2 |  |  |  | |  |  | |  | |  |  | |  |
| 3 |  |  |  | |  |  | |  | |  |  | |  |
| 4 |  |  |  | |  |  | |  | |  |  | |  |
| **单位联络人** | | |  | **联系电话** | | |  | | **邮箱** | | |  | |