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| **公益培训征集回执单** | | | |
| **推荐单位** |  | | |
| **联系人** |  | **联系电话** |  |
| **课题名称** |  | | |
| **培训内容大纲** |  | | |
| **企业讲师介绍** |  | | |

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备注：请将本回执表、讲师电子版照片发至鲁环协邮箱：sdepipx@163.com 。