附件1

2020年北京工艺美术行业培训报名回执单

单位名称： 联络人：

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **姓名** | **身份证号** | **职务** | **手机** | **是否为工艺大师（级别）** | **从事专业** | **年龄** | **学历** |
| 1 |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |