**附件一：**

**说明会参会回执**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 序号 | 姓名 | 性别 | 职务  /职称 | 所在院校 | 联系电话 | 电子邮箱 |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |

请于4月16日前将参会回执发送至： 898272497@qq.com