**( )课题组参加仪器培训报名表**（**导师：( )）**

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| **参与培训的师生个人信息** | | | | | | | | |
| **序号** | **姓名** | | **年级** | **联系电话** | **需培训仪器（填序号，可多选）** | **不能参加培训的时段**（适用组内大部分人员） | **备注** |
| **1** |  | |  |  |  |  | 第一位为联系人 |
| **2** |  | |  |  |  |  |  |
| **3** |  | |  |  |  |  |  |
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| **导**  **师**  **意**  **见** | | **导师签名： 日期：** | | | | | | |