附件5

三亚市2020年小学大单元整体教学专题

培训项目参训学员回执表

填报日期： 年 月 日

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| **区（学校）全称** | | |  | | | | | |
| **填报人姓名** | | |  | | **联系电话** | |  | |
| **参训人员信息一览表** | | | | | | | | |
| **序号** | **姓名** | **性别** | **所在学校** | **学科** | | **年级** | **电话** | **备注**  **（有无特殊需求或特别说明之处）** |
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（注：本表可复印使用，表格由所在单位或学校统一填写后，请发送到项目组邮箱sanyajiaoshi@163.com,收到自动回复后即为报名成功。）