**ISO/TS16949内审员培训课程报名回执表**

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| --- | --- | --- | --- | --- |
| **单 位** |  | | **电话/传真** |  |
| **地 址** |  | | **邮 编** |  |
| **姓 名** | **职 务** | **手 机** | **E-mail** | |
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|  |  |  |  | |
| **备注：** |  | | | |

**五大核心工具培训课程报名回执表**

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| --- | --- | --- | --- | --- |
| **单 位** |  | | **电话/传真** |  |
| **地 址** |  | | **邮 编** |  |
| **姓 名** | **职 务** | **手 机** | **E-mail** | |
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| **备注：** |  | | | |

**注：**

**1、回执复印/自制有效 2、团体报名请注明领队或联系人。**