附件6

甘肃省第六届黄炎培职业教育创新创业大赛参赛回执

学校： 联络人： 电话：

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| 序号 | 组别 | 项目名称 | 姓名 | 性别 | 民族 | 职务 | 联系电话 | 身份 | 是否住宿 | 住宿要求 | 抵达时间 | 返程时间 | 备注 |
| １ |  |  |  |  |  |  |  | 领队 |  |  |  |  |  |
| ２ |  |  |  |  |  |  |  | 指导教师 |  |  |  |  |  |
| ４ |  |  |  |  |  |  |  | 领衔人 |  |  |  |  |  |
| ５ |  |  |  |  |  |  |  | 团队成员１ |  |  |  |  |  |
| ６ |  |  |  |  |  |  |  | 团队成员２ |  |  |  |  |  |

填表说明：

1.请在“组别”栏填写：“本科”、“高职”、“中职”；

2.领队请填写职务，指导教师和学生不再填写此栏；

3.住宿要求注明“单住”或“标间”字样

4. “抵达时间”、“返程时间”栏填写范例：12月18日15:00（24小时制）；

5.请于2024年12月12日16:00前将回执报送至邮箱：[435166947@qq.com](mailto:435166947@qq.com)。

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| 附件7  甘肃省职业院校创业模拟赛参赛回执  学校： 联络人： 电话：   |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | 序号 | 组别 | 团队名称 | 姓名 | 性别 | 民族 | 联系电话 | 身份 | 是否住宿 | 住宿要求 | 抵达时间 | 返程时间 | 备注 | | １ |  |  |  |  |  |  | 领队 |  |  |  |  |  | | ２ |  |  |  |  |  |  | 指导教师 |  |  |  |  |  | | ４ |  |  |  |  |  |  | 团队成员１ |  |  |  |  |  | | ５ |  |  |  |  |  |  | 团队成员２ |  |  |  |  |  | | ６ |  |  |  |  |  |  | 团队成员3 |  |  |  |  |  |   填表说明：  1.请在“组别”栏填写：“高职”、“中职”；  2.领队请填写职务，指导教师和学生不再填写此栏；  3.若学校同时参加创新创业大赛和创业模拟赛两项赛事，领队可填写同一人。  4.住宿要求注明“单住”或“标间”字样  5. “抵达时间”、“返程时间”栏填写范例：12月18日15:00（24小时制）；  6.请于2024年12月12日16:00前将回执报送至邮箱：[435166947@qq.com](mailto:435166947@qq.com)。 |