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| 2020年第十四期仲裁机构业务骨干实务技能提升高级研修班  **（本表可根据实际需要调整填写）**   |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **序号** | **姓名** | **性别** | **职务** | **工作内容** | **国内案件数** | **涉外案件数** | **办公电话** | **手机** | **电子邮箱** | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  | | 教学调研（可在本表下方删除描述内容后简要填写，亦可单独撰写） | | | | | | | | | | | **实况调研** | **您希望通过本次培训解决的专业问题，以便我们提供给授课老师做备课参考。** | | | | | | | | | | **您对未来培训的主题或内容的期待。** | | | | | | | | | | **您希望仲裁研究院这个平台能够为您提供哪些需求。** | | | | | | | | | | **总计人数** |  | | | **学员负责人** |  | | **联系方式** |  | | | **带班联系人：** | **张文 老师** | | | **联系方式：** | **15801554444，zcyjycupl@163.com（请确定后尽快反馈至该邮箱）** | | | | | |
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