**参会回执**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 单位名称 |  | | | |
| 姓 名 | 职 务 | 部　门 | 联系电话 | 邮 箱 |
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**招聘信息（必填）**

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| --- | --- | --- | --- | --- | --- | --- |
| 单位名称 |  | | | | 网址 |  |
| 地 址 |  | | | | 邮编 |  |
| 联系人 |  | 电话 |  | | E-mail |  |
| 单位简介 |  | | | | | |
| 招聘信息 | 需求岗位 | 人数 | | 相关要求 | | |
|  |  | |  | | |
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|  |  | |  | | |
| 薪酬情况 |  | | | | | |
| 备 注 |  | | | | | |