附表1：

后勤保障部\*\*\*中心（科室）

2019年培训计划汇总表

|  |  |  |  |
| --- | --- | --- | --- |
| 培训内容 | 培训对象 | 计划时间 | 备注 |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

 经办人签字： 负责人签字：