附件2：“国培计划（2019）”——海南省中小学薄弱学科教师培训各市县参训学员信息汇总表

区： 填报人： 联系电话：

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **姓名** | **学分账号** | **单位** | **学科** | **学段** | **职务** | **联系电话** | **身份证号码** | **备注** |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |