**意向单位报名登记表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | 意向单位名称 |  | | | | | 联系电话 | | |  | | 单位邮箱 |  | | | | | 单位传真 | | |  | | 单位地址 |  | | | | | | | | | | 意向单位授权代表姓名 |  | | | | | 手机号码 | | |  | | 身份证号码 |  | | | | | 电子邮箱 | | |  | | **拟遴选项目信息** | | | | | | | | | | | 项目名称 |  | | | | | | | | | | 项目编号 |  | | | | 包号 | | | |  | | **意向单位须知事项** | | | | | | | | | | | 我方了解如下事项：  1、我方保证本表填写的内容及提供的证件和资料真实有效，如有虚假则承担法律责任；  2、我方了解本项目意向方的资格要求，并将相关材料准备齐全参与遴选；  3、我方了解遴选文件的密封要求，并按遴选文件要求在应答文件外包装上标识相关内容；  4、我方已领取本项目遴选文件及相关资料； | | | | | | | | | | | 签署 | | |  | 报名日期 | | | | 年 月 日  时 分 秒 | | | **遴选机构审核（由遴选机构填写）** | | | | | | | | | | | 经 办 人： | |  | | 资料情况： | | |  | | | | 备 注： | |  | | | | | | | | |

注：

1、意向单位须按遴选公告要求备齐的报名资料合并在一个PDF版文件中一并发送，所有资料不要压缩。审核通过后，我司将发送遴选文件至意向单位报名表上所填被授权人邮箱。

1. 意向单位应认真填写本表，报名表签名处无需手签，无需盖章，填好信息回传Word版。
2. 遴选文件当天发到报名人邮箱，如当天未收到遴选文件请及时致电跟进。
3. 报名资料接收邮箱：gx@gxsz.com，邮件主题发文格式：“XXX公司”+“XXX项目”报名资料。