附件1

南安市技能大师（名师）工作室申报表

**申 报 单 位** （盖章）

**申报工作室名称**

**填 报 时 间**

**南安市人力资源和社会保障局制**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 申报单位基本情况 | | | | | | | | | | | | | | | | | | |
| 单位全称 | | |  | | | | | | | | | | | | | | | |
| 法人代表 | | |  | | | | | 办公电话 | | |  | | | 手机 | | |  | |
| 联系人 | | |  | | | | | 办公电话 | | |  | | | 手机 | | |  | |
| 传真电话 | | |  | | | | | | | | 电子邮箱 | | |  | | | | |
| 通信地址 | | |  | | | | | | | | | | | 邮编 | | |  | |
| 单位  简介 | | |  | | | | | | | | | | | | | | | |
| 领衔人基本情况 | | | | | | | | | | | | | | | | | | |
| 姓名 | | | | |  | | | | 性别 | | |  | | | 民族 | | |  |
| 出生年月 | | | | |  | | | | 政治面貌 | | |  | | | 学历 | | |  |
| 职业（工种） | | | | |  | | | | 职业资格等级 | | |  | | | | | | |
| 职务（职称） | | | | |  | | | | 身份证号码 | | |  | | | | | | |
| 办电 | | | | |  | | | | 手机 | | |  | | | | | | |
| 工作  简历 | | | | |  | | | | | | | | | | | | | |
| 技能特长  和  工作业绩 | | | | |  | | | | | | | | | | | | | |
| 市级及以上  获奖情况 | | | | |  | | | | | | | | | | | | | |
| 工作室成员情况（本表不够，可另附表填写） | | | | | | | | | | | | | | | | | | | | |
| 姓名 | 性别 | | 年龄 | | 学历 | 职业  （工种） | | | 职业资格  等级 | | | 技能特长 | | | 主要业绩 | | | | |
|  |  | |  | |  |  | | |  | | |  | | |  | | | | |
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|  |  | |  | |  |  | | |  | | |  | | |  | | | | |
| 申报单位意见 | | | | | （盖章）  年 月 日 | | | | | | | | | | | | | | |
| 行业主管部门或乡镇（街道、开发区）意见劳动事务保障部门意见 | | | | | （盖章）  年 月 日 | | | | | | | | | | | | | | |
| 市人力资源和社会保障部门意见 | | | | | （盖章）  年 月 日 | | | | | | | | | | | | | | |