附件2

江苏省科学技术普及专业评审专家推荐汇总表

填报单位（盖章）: 填报日期: 审核人（签字）: 联系电话:

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 序号 | 姓名 | 身份证号 | 性别 | 出生年月 | 民族 | 工作单位 | 手机号码 | 现专业技术资格 | 现职聘任时间 |
| 系列 | 专业 | 名称 | 等级 | 取得时间 |
| 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |  |  |  |