附件3

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| 2023年度成武县首席技师申报人员基本情况汇总表  呈报部门：（盖章） | | | | | | | | | | | |
| 序号 | 呈报部门 | 姓名 | 性别 | 出生年月 | 身份证号 | 工作单位 | 文化程度 | 参加工作时间 | 职业(工种) | 现职业资格（技能）等级及取得时间 | 备注 | |
| 1 |  |  |  |  |  |  |  |  |  |  |  | |
| 2 |  |  |  |  |  |  |  |  |  |  |  | |
| 3 |  |  |  |  |  |  |  |  |  |  |  | |
| 4 |  |  |  |  |  |  |  |  |  |  |  | |
| 5 |  |  |  |  |  |  |  |  |  |  |  | |
| 6 |  |  |  |  |  |  |  |  |  |  |  | |
| 7 |  |  |  |  |  |  |  |  |  |  |  | |
| 8 |  |  |  |  |  |  |  |  |  |  |  | |

推荐单位联系人： 联系电话：