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| 附件4 | | | | |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  |  | |  | |
|  | |  | |  | | 2020年度教师职称评审推荐花名册 | | | | | | | | | | | | | | | | | | | | | |
|  | | 填报单位(盖章): | | | | | | | | 填报人： | | | | 联系电话： | | | |  | |  | | 填报时间： | | | | | |
| 序号 | 工作单位 | | 姓名 | | 性 别 | | 族 别 | 出生日期 | 身份证号码 | 学历 | 学位 | 何时何校何专业毕业 | 现从事何种专业技术工作 | 专业技术工作年限 | 现任专 业技术 职务 | 取得 （聘任） 时间 | 拟晋升专业技术职务 | 拟申报专业 | 继续教育考核 | | 手机 | | 年度考核 | | 行政职务 | |
| 1 |  | |  | |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  |  | | | |
| 2 |  | |  | |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  |  | | | |
| 3 |  | |  | |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  |  | | | |
| 4 |  | |  | |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  |  | | | |
| 5 |  | |  | |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  |  | | | |
| 6 |  | |  | |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  |  | | | |
| 7 |  | |  | |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  |  | | | |
| 8 |  | |  | |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  |  | | | |
| 9 |  | |  | |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  |  | | | |
| … |  | |  | |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | |  |  | | | |