附件

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| **鞍山市技能大师工作站申请表** | | | | | | | | | | | | | | | | | | |
| 工作站  名称 |  | | | | | 工作站行业类别 | | | | | | |  | | | | | |
| 申办单位 基本情况 | 名称 | |  | | | | | | | | | | | | | | | |
| 负责人  姓名 | |  | | 职务 | |  | | | | | 联系 方式 | | |  | | | |
| 联系人  姓名 | |  | | 联系  方式 | |  | | | | | 邮箱 | | |  | | | |
| 工作站  地址 |  | | | | | | | | | | | | | | | | | |
| 领创人 自然情况 | 姓名 | |  | | | | 年龄 | | | |  | | | | 联系方式 | | |  |
| 工作单位及工作  岗位 | |  | | | | | | | | | | | | 技能等级 | | |  |
| 所获荣誉 | |  | | | | | | | | | | | | | | | |
| 驻站人员情况 | | | | | | | | | | | | | | | | | | |
| 姓名 | 性别 | 工作单位现职岗位 | | | | | 职业资格等级 | | 驻站 职位 | | | | | 专（兼）职 | | | 备注 | |
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| 场地及  设施 | 教学设备 | | | | | | | 实习设备 | | | | | | | | | | |
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| 主管  部门  意见 |  | | | | | | | | | | | | | | | | | |
| 专家  评审  意见 |  | | | | | | | | | | | | | | | | | |
| 市人力资源和社会保障局  意见 | 年 月 日 | | | | | | | 市  财  政  局  意  见 | | 年 月 日 | | | | | | | | |