附件3

苏州市技能大师（首席技师）工作室

申 报 表

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| 申 报 单 位 |  |
| 工 作 室 名 称 |  |
| 工作室工作领域 |  |

苏州市人力资源和社会保障局 制

年 月 日

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| **领办人** | | | |  | | **性别** | |  | | | **民族** | |  | | **政治面貌** | | | |  | |
| **工作单位** | | |  | | | | | | | | | **联系电话** | | | |  | | | | |
| **工作室地址** | | |  | | | | | | | | | **办公面积** | | | |  | | | | |
| **学历（学位）** | |  | | | | **参加工作时间** | | | | |  | | **从事职业（工种）** | | | | |  | | |
| **职业资格（职业技能）等级** | | | | | |  | | | | | **身份证号** | |  | | | | | | | |
| **工作室其他成员（若人员较多可另附表）** | **姓 名** | **职业资格（职业技能）及等级** | | | | | **年龄** | **突出业绩** | | | | | | | | | | | | |
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| **领办人主要工作业绩** | （可另附页详细阐述） | | | | | | | | | | | | | | | | | | | |
| **领办人主要获奖情况** | **获奖项目** | | | | **奖励名称** | | | | | **授予单位** | | | | **等级** | | | **排名** | | **年度** | |
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| **工作室申报单位简介** |  | | | | | | | | | | | | | | | | | | |
| **工作室基本条件及工作室成立的必要性和现有优势** |  | | | | | | | | | | | | | | | | | | |
| **申报单位对工作室支持措施** |  | | | | | | | | | | | | | | | | | | |
| **工作室成立后三年内的计划目标** | （可另附页详细阐述） | | | | | | | | | | | | | | | | | | |
| **申报单位承诺** | | | | | | | | | | | | | | | | | | | |
| **本单位申报苏州市技能大师（首席技师）工作室填报所有情况属实，如有虚假之处，本单位承担相应责任。**  **申报单位（公章）**  **负 责 人（签名）：**  **年 月 日** | | | | | | | | | | | | | | | | | | | |
| **县级市（区）人社部门意见** | | | | | | | | | **市人社部门意见** | | | | | | | | | | |
| （盖章）  年 月 日 | | | | | | | | | （盖章）  年 月 日 | | | | | | | | | | |