附件2

**拟任专业委员会主要负责人备案表**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **专业委员会名称** | | | |  | | | | |
| **姓 名** |  | | | **出生日期** | |  | | |
| **性 别** |  | | **民 族** |  | | **国 籍** |  | |
| **证件类型** |  | | **证件编号** |  | | | | |
| **政治面貌** |  | | **拟任职务** |  | | **本人签字** |  | |
| **通信地址** |  | | | | | | | |
| **邮政编码** |  | | **联系电话** |  | | **兼职/专职** |  | |
| **其他社会职务** | |  | | | | | | |
| **本人主要简历** | | | | | | | | |
| **自何年月至何年月** | | **在何地区何单位** | | | | | | **职务** |
|  | |  | | | | | |  |
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|  | |  | | | | | |  |
| **社会团体意见** | | | | | **本人所在单位人事部门意见** | | | |
| **（印章）**  **经办人：**  **年 月 日** | | | | | **（印章）**  **经办人：**  **年 月 日** | | | |

**（请将本人身份证/军官证/护照复印件粘贴在背面）**

**（请将本人身份证/军官证/护照复印件粘贴在此处）**

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| --- |
| **（请正反面打印本表）** |