**附件1**

**编号**

**“蜀道英才工程”申报书**

**(**xx项目**)**

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| **申 报 人** |  |
| **工作单位** |  |
| **推荐单位(地区)** |  |
| **专业领域** |  |
| **专业方向** |  |
| **联 系 人** |  |
| **联系电话** |  |
| **填表时间** |  |

**广元市人才工作领导小组办公室制**

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| **个人基本信息** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **姓 名** |  | | | | | | | | | | **性 别** | | | | |  | | | | | | | | **照片** | | | | |
| **出生日期** |  | | | | | | | | | | **政治面貌** | | | | |  | | | | | | | |
| **出 生 地** |  | | | | **民族** | | |  | | | **籍 贯** | | | | |  | | | | | | | |
| **身份证件**  **号码** |  | | | | | | | | | | **电子邮件** | | | | |  | | | | | | | |
| **最高学历**  **学位** |  | | | | **毕业院校** | | | | | |  | | | | | | | | | | | **专业** | |  | | | | |
| **现任职单位名称** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **行政职务** |  | | | | | | | | | | | | | **专业技术职称** | | | | | | | |  | | | | | | |
| **专业领域** |  | | | | | | | | | | | | | **专业方向** | | | | | | | |  | | | | | | |
| **教**  **育**  **经**  **历** | **学位** | | | | | **时间** | | | | | | **国家** | | | | | | | **院校** | | | | | | **专业** | | | |
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| **工**  **作**  **经**  **历** | **职务** | | | | | **时间** | | | | | | **国家** | | | | | | | **单位** | | | | | | | | | |
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| **主要成果** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1.领导（参与）的具体项目** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **起止时间** | | | **项目名称** | | | | | | | **经费总额** | | | | **经费来源** | | | | | | | **担任角色** | | | | | | | |
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| **2.代表性论著（论文）** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **论著（论文）**  **名称** | | | **期刊名称** | | | | | | | **发表时间** | | | | **论著（论文）作者** | | | | | | | | **被SCI、EI、ISTP、SSCI、CSSCI等收录情况** | | | | | **影响因子** | **他引次数** |
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| **3.授权专利** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **专利名称** | | | | | **专利号** | | | | | | **专利类别** | | | | | | | **专利所有者**  **（排序）** | | | | | | | | | **授权国家** | |
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| **4.获国家、省、市级奖励情况** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **奖项（荣誉称号）名称** | | | | | | | | **授予单位** | | | | | | | | | | | **时间** | | | | | | | | | |
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| **5.学术、技术组织任职情况** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **名称** | | | | **界别** | | | | | | | **职务** | | | | | **起始时间** | | | | | | | | **终止时间** | | | | |
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| **主要业绩及成果评价** |
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| **入选后工作发展计划** |
|  |
| **本人郑重承诺，以上信息均真实有效。**    **申报人签字：**  **年 月 日** |

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| **成果转化单位意见** |
|  |
| **工作单位意见** |
| **单位负责人签字： 单位（公章）**  **年 月 日** |
| **推荐单位（地区）意见** |
| **盖章（签字）**  **年 月 日** |

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| **单位基本信息** | |
| **单位名称** |  |
| **统一社会信用代码** |  |
| **注册资金** |  |
| **法定代表人** |  |
| **所属行业** |  |
| **单位所在地区** |  |
| **上级主管部门** |  |
| **联系人** |  |
| **办公电话** |  |
| **移动电话** |  |
| **电子邮箱** |  |
| **邮政编码** |  |
| **通讯地址** |  |
| **单位账户信息** | |
| **单位开户名全称** |  |
| **开户银行** |  |
| **开户账号** |  |
| **财务部门联系人** |  |
| **联系电话** |  |