2020年清流县特聘动物防疫专员报名表

报名表编号：

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 |  | | | | | 性别 | | | |  | | | 年龄 | | |  | | | | 照片 |
| 身份证号码 |  | | | | | | | | | 联系  电话 | | |  | | | | | | |
| 学历 |  | | | 毕业  学校 | | | |  | | | | | | | | | | | |
| 政治面貌 |  | | | 人员  分类 | | | | □畜牧兽医乡土专家 □养殖能手 □新型经营主体技术骨干□退休农业科技推广人员 □农业科研教学单位中长期一线服务人员 □退休畜牧兽医科技推广人员　□其他 | | | | | | | | | | | | |
| 家庭住址 |  | | | | | | | | | | | | | | | | | | | |
| 从事产业 |  | | | | 从业年限 | | | |  | | | | | 产业规模 | | | |  | | |
| 现有  职称 |  | | | | 获得职称时间 | | | |  | | | | | 职称审批机构 | | | |  | | |
| 家庭状况 | 家庭人口 | |  | | | | 家庭劳动力（个） | | | |  | | | | 家庭年经营收入（元） | | | |  | |
| 专业特长及业绩（获奖）情况 |  | | | | | | | | | | | | | | | | | | | |
| 报名信息确认栏 | 本人承诺以上信息均为本人真实情况，若有虚假、责任自负。  报名人签名：              年   月   日 | | | | | | | | | | | | | | | | | | | |
| 乡镇畜牧兽医水产站（或县中心站所）意见 | | 盖章（签字）            年  月   日 | | | | | | | | | | 畜牧兽医水产中心意见 | | | | | 盖章（签字）             年  月   日 | | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |