附件1

重庆三峡医药高等专科学校中层副处级以上实职干部改任同级非领导职务申报表

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| **姓　名** |  | | **性　别** |  | **出生年月** |  | **政治面貌** |  |
| **全日制学历及**  **毕业院校** | |  | | | **最高学历、学位** | |  | |
| **现任职务及时间** | |  | | | | | | |
| **拟改任非领导职务级别** | |  | | | | | | |
| **现任职履职情况（不超过300字）** | |  | | | | | | |
| **资格审查情况（由考核组填写）** | |  | | | | | | |