附件2

重庆三峡医药高等专科学校中层副处级干部晋升上一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** | |  | |
| **拟申报晋升非领导职务级别** | |  | | | | | | |
| **现任职务及时间** | |  | | | | | | |
| **医专成立后任中层副职时间** | |  | | | | | | |
| **专技职务及任职时间** | |  | | | | | | |
| **受表彰情况** | |  | | | | | | |
| **任中层副职期间年度考核评优情况** | |  | | | | | | |
| **现任职履职情况（不超过300字）** | |  | | | | | | |
| **资格审查情况（由考核组填写）** | |  | | | | | | |