附件5

**技能大师工作室建设项目申报单位汇总表**

推荐单位：（盖章）

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **申报级别** | **姓名** | **性别** | **出生**  **年月** | **单 位** | **从事职业 （工种）** | **技能**  **等级** | **荣获奖项情况** | **申报人电话** | **联系人**  **及电话** |
| 1 | 国家级/  省级 |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |