附 件

生物医药专家备案表

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| 基  本  情  况 | | 姓名 |  | | 性别 | | |  | 出生日期 | |  | | |
| 职务 |  | | 职称 | | |  | 身份证号 | |  | | |
| 工作单位、处（室） | | |  | | | | | | | | |
| 单位类别 | | □科研院所 □行业管理部门 □大专院校  □企业 □其他\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
| 通讯地址 | | \_\_\_\_­­\_\_\_\_省\_\_\_\_\_\_\_市\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | 邮编 | |  |
| 办公电话 | |  | | | | | 手机 | |  | | |
| E-mail | |  | | | | | | | | | |
| 主  要  成  果  与  荣  誉 | |  | | | | | | | | | | | |
| 简历（自大学起） | 起止时间 | | | | 学校或单位 | | | | 专业 | | 学位（职务） | |
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| 专业研究及获奖情况 | 项目名称 | | | | | | | | 项目来源 | | 完成、获奖情况 | |
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| 注：项目来源指下达或委托任务单位，如国家、部门、地方、企业、单位自有等。奖励情况以获国家、省（部）级为主。 | | | | | | | | | | | |
| 社  会  兼  职  情  况 | | 起止时间 | | | | | 兼职单位 | | | | 兼职身份 | | |
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| 注：如学会、协会、标准化技术委员会以及政府部门的各类专家委员会等。 | | | | | | | | | | | |