|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 楚雄州综合评标专家单位推荐表 | | | | | | | | | | | |
| 姓 名 | |  | 性别 | | | |  | | | | 照 片 |
| 出生日期 | |  | 所在地区 | | | |  | | | |
| 身份证号码 | |  | | | | | | | | |
| 职 称 | |  | 年限 | | |  | | | | |
| 从事专业类别 | |  | | 从事年限 | | | |  | | | |
| 最高学历 | |  | | 最高学位 | | | |  | | | |
| 毕业院校 | |  | | 所学专业 | | | |  | | | |
| 执业资格1 | |  | | 注册证书编号1 | | | |  | | | |
| 执业资格2 | |  | | 注册证书编号2 | | | |  | | | |
| 执业资格3 | |  | | 注册证书编号3 | | | |  | | | |
| 手机号码 | |  | | 电子邮箱 | | | |  | | | |
| 单位名称 | |  | | | | | | 单位电话 | |  | |
| 单位地址 | |  | | | | | | 邮编 | |  | |
| 家庭地址 | |  | | | | | | | | | |
| 专业类别 | | | | | 专业编号 | | | | 所属行业 | | |
| 主评专业 | |  | | |  | | | |  | | |
| 辅评专业一 | |  | | |  | | | |  | | |
| 辅评专业二 | |  | | |  | | | |  | | |
| 辅评专业三 | |  | | |  | | | |  | | |
| 辅评专业四 | |  | | |  | | | |  | | |
| 辅评专业五 | |  | | |  | | | |  | | |
| 工作简历 | | | | | | | | | | | |
| 起止年月 | 单位及职称、资质资格 | | | | | | | | | 证明人 | |
|  |  | | | | | | | | |  | |
|  |  | | | | | | | | |  | |
|  |  | | | | | | | | |  | |
|  |  | | | | | | | | |  | |
| 评标实践 列举 |  | | | | | | | | | | |
| 业务技术  专长 |  | | | | | | | | | | |
| 其他需要明 的情况 |  | | | | | | | | | | |
| 单位意见 | (公章)  年 月 日 | | | | | | | | | | |