附件5

推 荐 对 象 汇 总 表

推荐单位（盖章）：  填表日期：年月日

一、全国市场监管系统优秀市场监管所推荐对象汇总表

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **优秀市场监管所名称** | **所属单位** | **行政级别** | **本所人数** | **所长姓名** | **所长联系电话** | **通信地址** | **邮编** | **备注** |
|
| **1** |  |  |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |  |  |

二、全国市场监管系统优秀基层工作者推荐对象汇总表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **姓名** | **性别** | **民族** | **政治**  **面貌** | **学历**  **学位** | **工作单位** | **单位**  **性质** | **职务** | **行政级别** | **专业技术职务任职资格** | **身份证号** | **联系电话** | **通信地址** | **邮编** | **备注** |
| **1** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

注：1.根据差额推荐要求，请按推荐顺序填写。可根据字数调整行高。曾获得过其他省部级以上称号的推荐对象，请在备注栏中注明。

2.单位性质根据所在单位性质选填机关、参公事业单位、事业单位、企业、社团或其他。