附件2

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| 序号 | 姓名 | 性 别 | 出生年月 | 文化程度 | 民 族 | 身份证号 | 参加工作时间 | 原职业（工种） | 等 级 | 取 证时 间 | 聘 任时 间 | 申报（职  业）工种 | 申报（职业）工种等级 | 工作单位 |
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机关事业单位工勤岗位人员技能晋级考核花名册

填报单位（盖章）： 负责人： 填表人： 填写日期： 年 月 日