附件2

烟台市中小学科学教育顾问专家库成员申请汇总表

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **专家 姓名** | **工作单位** | **职务** | **单位 类别** | **年龄** | **职称** | **党派** | **人才称号** | **简述所在行业领 域成就****（100 字内）** | **电话** | **邮箱** | **推荐 单位** |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |