附件2

息烽县职业技能培训机构遴选审批表

申报单位： （盖章）

申报日期： 年 月 日

一、单位简介：

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二、基本情况：

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| 单位名称 | | |  | | | | | | | 单位性质 | | |  | | | | |
| 批准设立机关 | | |  | | | | | | | 登记证号 | | |  | | | | |
| 办学许可证号码 | | |  | | | | | | | | | | | | | | |
| 营业执照或事业单位法人证书号  （民办非企业证书编号） | | |  | | | | | | |  | | | | |  | | |
| 单位地址 | | |  | | | | | | | 邮政编码 | | | | |  | | |
| 法定代表人 | | |  | | | 联系电话 | | |  | | 手机 | | | |  | | |
| 联系人 | | |  | | | 联系电话 | | |  | | 手机 | | | |  | | |
| 电子邮箱 | | |  | | | | | | | | | | | | | | |
| 培训场地情况  （使用面积） | | | 其 中 | | | | | | | | | | | | | | |
| 教室 | | | | | 实训场地 | | | | 办公场地 | | | | | |
| 个数 | | 总面积 | | | 个数 | | 总面积 | | 个数 | | | | | 总面积 |
| 自有 | | M2 |  | | M2 | | |  | | M2 | |  | | | | | M2 |
| 租用 | | M2 |  | | M2 | | |  | | M2 | |  | | | | | M2 |
| 教职工  总人数 | | | 其 中 | | | | | | | | | | | | | | |
| 管理人员 | | | | | | | 教师 | | | | | | | |
| 专职 | | | | 兼职 | | | 专职 | | | | 兼职 | | | |
| 人 | | | 人 | | | | 人 | | | 人 | | | | 人 | | | |
| 专  职  管  理  人  员 | 姓名 | | | 性别 | 年龄 | | 学历 | | | 职称或职业资格 | | | | | | 职务 | |
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| 兼  职  管  理  人  员 | 姓名 | 性别 | 年龄 | 学历 | 职称或职业资格 | 职务 |
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三、申报开展培训项目、等级

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| 序号 | 培训项目名称 | 等级  （初、中、高级） | 年培训规模 |
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四、申报开展培训项目师资、场地、设备情况（分项目填写）

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| 培训项目名称 | | | | | | | | | | | | 等级 | |
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| 师 资 | | | | | | | | | | | | | |
| 专  职  教  师 | 姓名 | | | 性别 | 年龄 | | 学历 | | 职称或职业资格 | | | 任教科目 | |
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| 兼  职  教  师 |  | | |  |  | |  | |  | | |  | |
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| 培 训 场 地 | | | | | | | | | | | | | |
|  | | | 实训教学教室 | | | | | | | 实习操作工位数 | | | |
| 自有 | | | 个 | | | | | ㎡ | | 个 | | | |
| 租用 | | | 个 | | | | | ㎡ | | 个 | | | |
| 设 备 | | | | | | | | | | | | | |
| 序号 | | 设备名称 | | | | 型号 | | | | | 单台价格 | | 数量 |
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| 培训合格率、培训后就业率承诺及安全管理等保障措施  法定代表人签字（盖公章）：  年 月 日 |
| 就业局审核意见  审核组成员签字：  评审日期： 年 月 日 |
| 县人力资源和社会保障局审批意见  审批人签字： （章）  年 月 日 |