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| 附件：  中国注册税务师协会师资推选申请表 | | | | | | | | | | | | | | | | | | |
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| 姓名 |  | | 性别 |  | 出生年月 | | | | | |  | | | 正面免冠彩色照片（2寸） | | | | |  | | | | | | | |
| 政治面貌 |  | | 民族 |  | 籍贯 | | | | | |  | | |  | | | | | | | |
| 参加工作时间 |  | | | | 从事涉税专业工作年限 | | | | | |  | | |  | | | | | | | |
| 工作单位及职务 |  | | | | | | | | | | | | |  | | | | | | | |
| 社会职务 | （最主要的1-3个） | | | | | | | | | | | | | | | | | |  | | | | | | | |
| 职业资格证书 | （如：税务师、注册会计师、律师等） | | | | 职称 | | | | | |  | | | | | | | |  | | | | | | | |
| 擅长专业 |  | | | | | 普通话水平  （国家考试成绩） | | | | | | | |  | | | | |  | | | | | | | |
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| 学历学位 | 本科毕业院校及专业 |  | | | | 是否脱产全日制 | | | | | | |  | | | | | |  | | | | | | | |
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| 研究生毕业院校及专业 |  | | | | 是否脱产全日制 | | | | | | |  | | | | | |  | | | | | | | |
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| 身份证号 |  | | | | | 微信号 | | | | | |  | | | | | | |  | | | | | | | |
| 手机号 |  | | | | | 个人邮箱 | | | | | |  | | | | | | |  | | | | | | | |
| 通讯地址 |  | | | | | | | | | | | | | | | | | |  | | | | | | | |
| 工作简历 | 要求：从从事涉税工作开始填写，注明起止时间。 | | | | | | | | | | | | | | | | | |  | | | | | | | |
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| 授课经历 | 要求：提供近五年有影响的演讲或授课经历（至少10次），注明时间、课程名称、主办或承办单位名称。 | | | | | | | | | | | | | | | | | |  | | | | | | | |
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| 论文及出版专著 | 要求：请注明最近3年发表论文及出版著作的名称、时间、刊物名称或出版社名称等。 | | | | | | | | | | | | | | | | | |  | | | | | | | |
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| 获奖及表彰情况 | 要求：请注明获得省市级奖励或表彰的时间、奖项名称以及级别等。 | | | | | | | | | | | | | | | | | |  | | | | | | | |
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| 最擅长讲授课程 | 要求：注明申报讲授课程的名称、内容提要、以及本人的专业优势。 | | | | | | | | | | | | | | | | | |  | | | | | | | |
| 所在单位  推荐意见 | 单位公章：  日 期：2025年 月 日 | | | | | | | | | | | | | | | | | |  | | | | | | | |
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| 地方税协  初审意见 | 协会公章：    日 期：2025年 月 日 | | | | | | | | | | | | | | | | | |  | | | | | | | |
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| 中税协审核意见 | 日 期：2025年 月 日 | | | | | | | | | | | | | | | | | |  | | | | | | | |
| 备注 |  | | | | | | | | | | | | | | | | | |  | | | | | | | |
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填 表 说 明

1.表内所列项目，由申请人填写，并对所填情况的真实性负责。申请人没有表内对应项目的，可填写“无”。

2.“所在单位审核意见”由申请人所在单位填写并盖章。

3.“地方税协推荐意见”由地方税协填写并盖章。

4.照片一律用近期二寸正面免冠彩色照片。