附件：

大连市专业技术人员继续教育基地申报表

**申报单位：**

**推荐单位：**

**填表日期：**

**大连市人力资源和社会保障局 制**

大连市专业技术人员继续教育基地申报表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **单位名称** | | | |  | | | | **单位性质** | | |  | | |
| **通讯地址** | | | |  | | | | **传 真** | | |  | | |
| **联 系 人** | | | |  | | | | **联系电话** | | |  | | |
| **培训专业** | | | |  | | | | | | | | | |
| **专业技术人才**  **培训领域** | | | |  | | | | | | | | | |
| **曾荣获或命名称**  **号（基地）情况** | | | |  | | | | | | | | | |
| **继续教育师资情况** | **专职教师人数** | | | | | | | | | | | | |
| **学历** | | **研究生** | **本科** | | **大专** | | | **其他** | | | **合计** | |
|  |  | |  | | |  | | |  | |
| **职称** | | **高级** | **中级** | | **初级** | | | **其他** | | | **合计** | |
|  |  | |  | | |  | | |  | |
| **兼职教师人数** | | | | | | | | | | | | |
| **学历** | | **研究生** | **本科** | | **大专** | | | **其他** | | | **合计** | |
|  |  | |  | | |  | | |  | |
| **职称** | | **高级** | **中级** | | **初级** | | | **其他** | | | **合计** | |
|  |  | |  | | |  | | |  | |
| **教学场地情况** | **办学建筑面积（m2）** | | | |  | | | | | | | | |
| **课室总面积（m2）** | | | | **普通教室** | | **多功能室** | | | **电教室** | | | **实训场地** |
| **面积** | | | |  | |  | | |  | | |  |
| **教室数量** | | | |  | |  | | |  | | |  |
| **教学设备配置** | | | |  | |  | | |  | | |  |
| **管理制度** | **（分条列出制度名称，具体内容另附页）** | | | | | | | | | | | | |
| **情况说明**  **（主要说明培训机构的基本概况、往年培训情况、培训条件、培训能力、优势专业等）** | | | | | | | | | | | | | |
| **申报单位意见** | | **（公章）**  **年 月 日** | | | | | | | | | | | |
| **推荐**  **单位**  **意见** | | **（简述推荐理由）**  **（公章）**  **年 月 日** | | | | | | | | | | | |