**附件2：**

**拉延模具数字化设计职业技能等级证书（中级）**

**师资培训申请表**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **姓名：** |  | **性别：** |  | **出生年月：** |  |  |
| **身份证号：** |  |
| **文化程度：** |  | **专业：** |  | **职称/职务：** |  |
| **联系方式：** |  | **工作年限：** | 　 |
| **工作单位：** |  |
| **联系地址：** |  |
| **个人简介：** |
|  |
| **主要工作情况介绍：** |
|  |
| **推荐单位意见：** |
|  |