编号

邹竞蒙气象科技人才奖

推 荐 表

推荐单位：

人选姓名：

工作单位：

|  |  |
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| 中国气象学会制 |  |

**填 表 说 明**

1.本表需登录中国气象学会网站<http://www.cmakjgl.cn/cms/>在线填报。提交成功后下载带有“推荐表正式版”水印的推荐表上报。

2.封面编号由中国气象学会邹竞蒙气象科技人才奖评选委员会奖励办公室统一填写。

3.专业专长：现所从事的研究领域或专业。

4.社会职务：指担任省级以上人大代表、政协委员、党代会代表及以上职务。

5.简历：从大学开始填写，大学期间须填写所学专业及所在院、系。

6.曾获奖励情况：指省部级以上科技奖励和荣誉称号。

7.获基金项目资助情况：包括已完成和正在开展的各类基金项目。

8.工作单位意见：指被推荐人工作单位对被推荐人的德、才、绩评语，200字以内。

9.推荐单位意见：指负责向气象科技奖励与人才举荐工作委员会推荐人选的单位对该人选的明确意见，200字以内。

**一、基本情况**

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| 姓名 | | | | | |  | | 性别 | | | | |  | | | | | | 照片 | | | |
| 出生日期 | | | | | |  | | 民族 | | | | |  | | | | | |
| 学历 | | | | | |  | | 学位 | | | | |  | | | | | |
| 籍贯 | | | | | | 省市（县） | | 党派 | | | | |  | | | | | |
| 专业技术职务 | | | | | |  | | 行政职务 | | | | |  | | | | | | | | | |
| 专业专长 | | | | | |  | | | | | | | | | | 会员证号 | | | | |  | |
| 工作单位 | | | | | |  | | | | | | | | | | | | | | | | |
| 单位地址 | | | | | |  | | | | | | | | | 邮政编码 | | | | |  | | |
| 单位电话 | | | | | |  | | | | | | | | | 手机 | | | | |  | | |
| 电子信箱 | | | | | |  | | | | 身份证号码 | | | | | | |  | | | | | |
| 推荐单位联系人 | | | | | |  | | | | 联系电话 | | | | | | |  | | | | | |
| 在国内外学术  团体任职情况（5项以内） | | | | | |  | | | | | | | | | | | | | | | | |
| 社会职务（5项以内） | | | | | |  | | | | | | | | | | | | | | | | |
| 简  历 | 何年何月至何年何月 | | | | | | | | | | 单位（学校）职务（专业） | | | | | | | | | | | |
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| **二、奖励情况** | | | | | | | | | | | | | | | | | | | | | | |
| 获奖时间 | | | | | 奖项名称 | | | | | | | 奖励等级（排名） | | | | | | | | | | 授奖部门 |
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| 三、基金项目资助情况 | | | | | | | | | | | | | | | | | | | | | | |
| 年度 | | | | 基金种类 | | | 基金项目名称 | | | | | | | | | | | 金额 | | | | 排名 |
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| 四、发表论文、专著的情况（论文限5篇，专著限２部） | | | | | | | | | | | | | | | | | | | | | | |
| 序号 | | 论文（或专著）名称 | | | | | | | 刊名 | | | | | 作者 | | | | | | | | |
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| 五、主要科学发现、科学技术成就和贡献、业务技术创新或技术推广要点 | | | | | | | | | | | | | | | | | | | | | | |
| （5页以内） | | | | | | | | | | | | | | | | | | | | | | |
| 六、科技、业务成果应用情况或技术推广情况 | | | | | | | | | | | | | | | | | | | | | | |
| （限2页） | | | | | | | | | | | | | | | | | | | | | | |
| 声  明 | | | 本人对以上内容及全部附件材料的真实性和客观性负责。  被推荐人签名：  年 月 日 | | | | | | | | | | | | | | | | | | | |
| 工  作  单  位  意  见 | | | 负责人签字： 单位盖章：  年 月 日 | | | | | | | | | | | | | | | | | | | |
| 推  荐  单  位  （人）  意  见 | | | 负责人签字： 单位盖章：  年 月 日 | | | | | | | | | | | | | | | | | | | |