**附件**

**申报浙江省任教三十年荣誉证书教师名册**

单位（盖章）： 联系人： 联系电话： 年 月 日

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| 序号 | 姓 名 | 性别 | 出生年月 | 参加工作时间 | 任教年限 | 教师职务 | 联系电话 | 备 注 (注明退休年月) |
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注：申请对象：至2021年8月底任教年限满三十年的教师（按教龄计算办法计算）。