河源市中小学教师职称评价标准条件一览表

工作单位（全称，盖章）：

审核人（签字）： 校长（签字）：

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| 姓　名 | |  | 性别 | |  | 出生年月 | | |  | 学历（学位） | | |  |
| 申报何专业职称 | | 学段 学科 教师职称 | | | | | | 是否符合倾斜政策或放宽资历年限条件 | | | 如是，需写明属于哪种情形 | | |
| 评价  内容 | 评价标准条件款项 | | | 符合条件的打“√” | | | 申报表中对应内容的页码及栏目 | | | | | 对应佐证材料情况 | |
| 基本  条件 | 示例：第X条第X款第X项 | | |  | | | 示例：第X页，XX情况栏 | | | | | 示例：证书证明材料第X页，或育人工作第X页 | |
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| 学历  资历 |  | | |  | | |  | | | | |  | |
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| 育人  工作 |  | | |  | | |  | | | | |  | |
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| 课程教学（课程建设与教学指导） |  | | |  | | |  | | | | |  | |
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| 教研  科研 |  | | |  | | |  | | | | |  | |
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| 示范  引领 |  | | |  | | |  | | | | |  | |
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**本人承诺填报内容及提交评审材料真实、准确，没有弄虚作假行为。对违反承诺所造成的后果，本人自愿按规定承担相应责任。**

　　　　　　　　　　　　　　　申报人亲笔签名：

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