附件2

编号

**南阳市学会服务站**

**建设申请表**

（非企业版）

申请单位（盖章）：

法人代表：

建站名称：

申请时间：

**南阳市科学技术协会**

**填写说明及要求**

一、填写前请仔细阅读申请表，并根据文件中有关申请条件，按要求认真填写。

二、填写内容应实事求是、内容详实、文字精炼。

三、本表用A4纸双面打印，于左侧加封面装订成册，并需提供Word电子文档。本表内有关栏目内容填写空间不够的，可在电子版中自行调整，顺次下移填写。

四、对本表内容或其他需要补充说明的，可另附页说明。

五、所有材料评审结束后，不予退还。

**承 诺 书**

本单位承诺申报的所有材料真实有效，材料中所填数据准确，情况介绍与实际情况相符。若发生与上述承诺不符的事实，本企业负责所有的责任。

申请单位法人代表（签字）：

年 月 日

申请单位（盖章）：

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| **单位基本信息** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 单位  名称 | |  | | | | | | | | | | | | | | | | 法人  代表 | | | | | | | | | |  | | | | | |
| 单位  网址 | |  | | | | | | | | | | | | | | | | 成立  时间 | | | | | | | | | |  | | | | | |
| 所属  行业 | |  | | | | | | | | | | 单位资产 | | | | | | （万元） | | | | | | | | | | | | | | | |
| 联系人 | |  | | | | 电话 | |  | | | | 手机 | | | |  | | | | | 邮箱 | | | | | | |  | | | | | |
| 地址 | |  | | | | | | | | | | | | | | | | | 邮政编码 | | | | | | | | |  | | | | | |
| 单位  性质 | | * 医院 □ 高校 □ 科研院所 □ 其他 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **单位人员配备情况** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 上年末员工总人数 | | （人） | | | | | 管理人员数 | | | | | | （人） | | | | | | | 技术人员数 | | | | | | | | | | （人） | | | |
| 职称 | | 正高级 （人） | | | | | | | | 副高级 （人） | | | | | | | | | | | | | 中级 （人） | | | | | | | | | | |
| 学历 | | 博士 （人） | | | | | | | | 硕士 （人） | | | | | | | | | | | | | 本科 （人） | | | | | | | | | | |
| **单位研发实力** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| □重点实验室 □重点建设学科 □博士后科研工作站 □其他 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **预计学会服务站运行支持情况** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 年经费投入（万元） | | | | |  | | | | | | | 办公场所面积（㎡） | | | | | | | | | | | |  | | | | | | | | | |
| 专职人员 | | | | | | | | | | | |  | | | | | | | | | |
| **国家（省）级学会信息** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 学会名称 | | | | |  | | | | | | | | | | | | | | 法人代表 | | | | | | | | | |  | | | |
| 通信地址 | | | | |  | | | | | | | | | | | | | | 邮 编 | | | | | | | | | |  | | | |
| 联系人 | | | | |  | | | 座机电话 | | | | | | |  | | | | 移动电话 | | | | | | | | | |  | | | |
| 职务(职称) | | | | |  | | | 传 真 | | | | | | |  | | | | 电子邮箱 | | | | | | | | | |  | | | |
| **进站首席学会专家资料** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 姓名 | | |  | | | | | | | | 性别 | | |  | | | | 出生年月 | | | | | | | |  | | | | | | |
| 专业类别 | | |  | | | | | | | | | | | 研究方向 | | | | | | | |  | | | | | | | | | | |
| 工作单位 | | |  | | | | | | | | | | | 职务 | | | | | | | |  | | | | | | | | | | |
| 联系地址 | | |  | | | | | | | | | | | 联系邮箱 | | | | | | | |  | | | | | | | | | | |
| 邮政编码 | | |  | | | | | | 联系电话 | | | | |  | | | | | | | | 手机 | | | | |  | | | | | |
| **引进学会团队成员情况** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 姓名 | | 性别 | | 出生  年月 | | | 最高  学历 | | | | 专业及研究方向 | | | | | | 工作  单位 | | | | | | | | 职务/职称 | | | | | | | 电话  (手机) |
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| **建站单位基本情况介绍（简述单位在本行业或本区域的地位）** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **服务站工作基本内容（另附协议文本）** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **服务站工作初步成效（可另附页）** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **审核意见** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 县（市、区）科协  意见 | | | | | 单位盖章：  年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 市科协意见 | | | | | 单位盖章：  年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | |

注：1.建站单位指与上级学会共建学会服务站的具有产业特色、一定辐射能力和科技含量的企业、产业园区、科技社团、高校、科研院所等。

2.“服务站工作基本内容”列出协议中主要部分即可，详细内容在协议中体现。

3.“服务站工作初步成效”主要指建站后开展的工作实绩，包括建站前已开展并延伸的工作实绩。