附件1 2018年教职工暑期疗休养报名表

\_\_\_\_\_\_\_\_\_\_\_\_工会

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **姓名** | **性别** | **工号** | **身份证号码** | **联系电话** | **身体健康状况** | **首选线路** | **可调剂线路** | **本人确认**  **签字** |
| 1 |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |
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| 9 |  |  |  |  |  |  |  |  |  |
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| 12 |  |  |  |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  |  |  |  |
| 14 |  |  |  |  |  |  |  |  |  |

**说明：**

**1.登记的姓名必需与本人身份证名字相符合，并打印报名表纸质版上报校工会，同时上交身份证复印件。注意身份证有效期，如果超出有效期无法成行，责任自负。**

**2.参加疗休养必须带好身份证原件，复印件无效。**

**3.请各二级工会务必在6月12日（周二）下班之前把报名表纸质版交至校工会办公室（教工活动中心302室）**

**二级工会主席签名\_\_\_\_\_\_\_\_\_\_\_\_ 经办人：\_\_\_\_\_\_\_\_\_\_\_\_ 联系电话：\_\_\_\_\_\_\_\_\_\_**