附件5

2023年增城区申报单位总量控制类引进人才入户需求申报统计表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **工作单位** | **单位类别** | **姓名** | **性别** | **身份证号码** | **年龄** | **工作岗位** | **社保年限** | **文化程度** | **专业技术资格** | **技术能力** | **职务级别** | **2020-2022年度****个税缴纳金额** | **总分** |
| **在现单位连续缴纳社保时间** | **分值** | **学历** | **分值** | **等级** | **分值** | **等级** | **分值** | **级别** | **分值** | **金额** |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

 **单位（公章）： 联系人： 联系电话：**