**附件：**

**“双碳”工作委员会单位成员申请表**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **单位名称** |  | | | | **资质范围等级** | |  |
| **地址** |  | | | | **所属行业** | |  |
| **单位负责人** | **姓名** | |  | **联系人** | | **姓名** |  |
| **职务** | |  | **电话** |  |
| **电话** | |  | **邮箱** |  |
| **单位简介** | |  | | | | | |
| **单位意见** | | **单位盖章**  **单位负责人签字：** | | | | | |

**“双碳”工作委员个人成员申请表**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **姓名** |  | **性别** |  | | **出生年月** |  | | **照片** |
| **学历** |  | **民族** |  | | **职 务** |  | |
| **技术职称** |  | | | | **工作年限** |  | |
| **工作单位** |  | | | | | | |
| **单位地址** |  | | | | **办公电话** |  | | |
| **电子邮箱** |  | | | | **手 机** |  | | |
| **工作简历及业绩** |  | | | | | | | |
| **申请人**  **（签字）** | **年 月 日** | | | **所在单位意见（盖章）** | | | **年 月 日** | |