附件1

**中国知识产权研究会第七届中国科协青年人才托举工程项目**

**报名人选申报书**

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| 申 报 人： |  |
| 工作单位： |  |
| 推荐单位： |  |
| 联系电话： |  |
| 电子邮箱： |  |
| 申报日期： |  |

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| 中国知识产权研究会  2022年 | 制 |

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| 一、申报人基本情况 | | | | | | | | | | | | | | | | | | |
| 姓 名 | | |  | | | | | 性 别 | | | |  | | | | | 照 片 | |
| 出生日期 | | |  | | | | | 民 族 | | | |  | | | | |
| 学 历 | | |  | | | | | 学 位 | | | |  | | | | |
| 籍 贯 | | |  | | | | | 党 派 | | | |  | | | | |
| 身份证号码 | | |  | | | | | 专业领域 | | | |  | | | | | | |
| 专业技术职务 | | |  | | | | | 评定时间 | | | |  | | | | | | |
| 工作单位及  行政职务 | | |  | | | | | | | | | | | | | | | |
| 单位性质 | | | □政府机关 □高等院校 □科研院所 □其他事业单位  □国有企业 □民营企业 □外资企业 □其他 | | | | | | | | | | | | | | | |
| 单位类型 | | | □高级团体会员 □普通团体会员 □研究会下属单位 | | | | | | | | | | | | | | | |
| 通信地址 | | |  | | | | | | | | | | | | | | | |
| 单位所在地 | | |  | | | | | 邮政编码 | | | |  | | | | | | |
| 单位电话 | | |  | | | | | 电子信箱 | | | |  | | | | | | |
| 二、主要学历（从大专或大学填起） | | | | | | | | | | | | | | | | | | |
| 起止年月 | | | | | | 校（院）及系名称 | | | | 专业 | | | | | 学位 | | | |
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| 三、工作经历（8项以内） | | | | | | | | | | | | | | | | | | |
| 起止年月 | | | | | | 工作单位 | | | | 职务/职称 | | | | | | | | |
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| 四、表彰奖励情况（8项以内） | | | | | | | | | | | | | | | | | | |
| 获奖时间 | | | | | 奖项名称 | | | | | | | | | 发奖单位 | | | | |
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| 五、主要社会兼职（5项以内） | | | | | | | | | | | | | | | | | | |
| 起止年月 | | | | | 名 称 | | | | | | | | | 职务 | | | | |
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| 六、计划牵头开展的专利大数据分析及情报应用研究项目 | | | | | | | | | | | | | | | | | | |
| （一）项目背景及研究基础  （二）项目目标及项目思路  （三）项目方案  （四）项目特色  （五）项目成果  （六）项目计划安排 | | | | | | | | | | | | | | | | | | |
| 七、牵头或参与专利大数据分析研究情况 | | | | | | | | | | | | | | | | | | |
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| 八、牵头或参与专利分析项目研究情况 | | | | | | | | | | | | | | | | | | |
| 序号 | 项目名称 | | | 项目类型 | | | | 角色作用 | | | 项目成效 | | | | | 项目亮点 | | |
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| 九、论文、著作、社会活动等成果 | | | | | | | | | | | | | | | | | | |
| 序号 | 成果名称 | | | | | | 成果类型 | | 主持/参与 | | | | 完成人位次 | | | | | 时间 |
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| 十、申报人声明和推荐单位意见 | | | | | | | | | | | | | | | | | | |
| 声  明 | | 本人同意参评，对以上申报内容及全部附件材料进行了核实确认，对前述申报材料的客观性和真实性负责。  本人已认真阅读并理解了《中国知识产权研究会关于中国科协第七届青年人才托举工程推荐人选的遴选办法》的内容要求，承诺本人满足全部遴选报名条件，不存在不能作为遴选对象的情形。  被推荐人签名：  年 月 日 | | | | | | | | | | | | | | | | |
| 推  荐  单  位  意  见 | | 负责人签字： 单位盖章：  年 月 日 | | | | | | | | | | | | | | | | |