附件3

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 2015年度青岛市事业单位专业技术人员岗位聘用情况统计表 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 填报单位(盖章)： | | | |  | | | | | | | | | | | 单位规格： | | | | | |  | | | | | | | | 填报时间： | | | 年 月 日 | | |
| 申报人员姓名（全部）： | | | |  | | | | | | | | | | | | | | | | | | 申报人员系列： | | | | | | |  | | | | | |
| **单位性质** | |  | | | **人员编制** | | | | |  | | | **实有人数** | | | | |  | | | | **主体岗位** | | |  | | | | **主系列岗位** | | |  | | |
| **单位岗位 设置总量** | |  | **岗位类别** | | | | | | | **管理岗位** | | | | | **专业技术岗位** | | | | | | | | | | | | **工勤技能岗位** | | | | | | | |
|  | | | | 主系列 | | | | 辅系列 | | | |  | | | 技术工 | | | | 普通工 |
| 数量 | | | | | | |  | | | | |  | | | |  | | | |  | | | |  | | |  | | | |  |
| **专业技术岗位** |  | 等级 | 合计 | | | 高级 | | | | | | | | | | | | | | | | | 中级 | | | | | | | 初级 | | | | |
| 一至四级小计 | | 一 | 二 | | 三 | 四 | | 五至七级小计 | | 五 | 六 | | | 七 | | | 合计 | 八 | | 九 | | 十 | | 合计 | 十一 | | 十二 | 十三 |
| 设岗数 |  | | |  | |  |  | |  |  | |  | |  |  | | |  | | |  |  | |  | |  | |  |  | |  |  |
| 主系列 | 设岗数 |  | | |  | |  |  | |  |  | |  | |  |  | | |  | | |  |  | |  | |  | |  |  | |  |  |
| 聘用数 |  | | |  | |  |  | |  |  | |  | |  |  | | |  | | |  |  | |  | |  | |  |  | |  |  |
| 空岗数 |  | | |  | |  |  | |  |  | |  | |  |  | | |  | | |  |  | |  | |  | |  |  | |  |  |
| 辅系列 | 设岗数 |  | | |  | |  |  | |  |  | |  | |  |  | | |  | | |  |  | |  | |  | |  |  | |  |  |
| 聘用数 |  | | |  | |  |  | |  |  | |  | |  |  | | |  | | |  |  | |  | |  | |  |  | |  |  |
| 空岗数 |  | | |  | |  |  | |  |  | |  | |  |  | | |  | | |  |  | |  | |  | |  |  | |  |  |
|  | 兼岗人数 |  | | |  | |  |  | |  |  | |  | |  |  | | |  | | |  |  | |  | |  | |  |  | |  |  |
| **单位人事部门意见** | | 负责人签字：  年 月 日 | | | | | **单位意见** | | | | | | | （盖章）   年 月 日 | | | | | | **主管部门意见** | | | | | | | | （盖章）  年 月 日 | | | | | | |