附件6

山东省特级教师推荐人员汇总表

填报地市（章）： 填表人： 联系电话： 填报时间： 年 月 日

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| 序号 | 工作单位 | 姓名 | 性别 | 出生年月 | 民族 | 政治面貌 | 最高学历 | 参加工作时间 | 教龄 | 班主任年限 | 现任专业技术职务 | 首聘时间 | 行政职务 | 任职时间 | 学段 | 任教学科 | 学校所在地 | 获奖等级 | 公开课等级 |
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