**附件2**

**安全总监基本情况汇总表**

**填报单位（盖章）： 填报日期：**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **安全总监**  **姓名** | **性别** | **出生年月** | **学历** | **专业** | **职称** | **工作年限**  **（安全管理）** | **所在单位** | **手机号码** | **备注** |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |

**填报人： 联系电话：**