**编号：04**

**基金会法定代表人登记表**

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| **基金会名称** |  | | | | | | | | **照**  **片** | |
| **姓 名** |  | | | **出生日期** |  | | | |
| **性 别** |  | | **民 族** |  | **国 籍** | | |  |
| **证件类型** |  | | **证件编号** |  | | | | | | |
| **政治面貌** |  | | **基金会职务** |  | | | **兼职**  **专职** | |  | |
| **通信地址** |  | | | | | | | | | |
| **邮政编码** |  | | **手机号码** |  | | | | **联系电话** |  | |
| **是否担任其他组织的法定代表人** | | | |  | | | | | | |
| **工作单位及职务** | |  | | | | | | | | |
| **其他社会职务** | |  | | | | | | | | |
| **本人主要简历** | | | | | | | | | | |
| **自何年月至何年月** | | **在何地区何单位** | | | | | | | | **职 务** |
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| **基金会意见** | | **本人所在单位人事部门意见** | | | | **业务主管单位审查意见** | | | | |
| **（印章）**  **经办人：**  **年 月 日** | | **（印章）**  **经办人：**  **年 月 日** | | | | **（印章）**  **经办人：**  **年 月 日** | | | | |

**（请将本人身份证∕军官证∕护照复印件粘贴在背面）**