**研究者简历**

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| 姓名 |  | | 性别 |  | | 出生年月 | | | |  | 照片（必须有，可电子版） |
| 学历 |  | | 职称 |  | | 职务 | | | |  |
| 专业 |  | | | | | | | | | |
| 联系电话 |  | | E-mail | |  | | | | | |  |
| 教育及工作经历 | 起止时间 | |  | | | | | | | | |
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| 培训情况 | 时间 | | 项目名称 | | | | | 级别 | | | |
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| 所属学会 |  | | | | | | | | | | |
| 参加临床研究情况 | 时间 | | 项目名称 | | | | | | 主研或参研 | | |
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| 发表论文及其他 |  | | | | | | | | | | |

填表人签名： 日期：