附件4

**2024年上半年隆安县教师资格认定**

**档案袋封面**

**编 号：**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **申请人基本情况** | | | | | | | | | | | |
| **姓名** | |  | | **性别** |  | **户籍所在地** | |  | | | |
| **申请资格种类** | | | |  | | | **申请任教学科** | | |  | |
| **身份证号码** | | |  | | | | **联系电话** | | |  | |
| **申请认定教师资格基本材料** | | | | | | | | | | | |
| **序号** | **项目** | | | | | | | **数量（份）** | | | **审核人签名** |
| **原件** | **复印件** | |
| **1** | **身份证复印件** | | | | | | |  | **1** | |
| **2** | **《广西壮族自治区教师资格认定体检表》** | | | | | | | **1** |  | |
| **3** | **近期免冠正面1寸彩色白底证件照片1张** | | | | | | | **1** |  | |
| **4** |  | | | | | | |  |  | |
| **5** |  | | | | | | |  |  | |
| **6** |  | | | | | | |  |  | |
| **7** |  | | | | | | |  |  | |
| **8** |  | | | | | | |  |  | |
| **9** |  | | | | | | |  |  | |

注：除申请认定教师资格基本材料部分的“数量”及“审核人签名”栏目外，其它栏目内容由申请人自己填写打印,编号不用填写