山形県優秀建設現場従事者顕彰審査表

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| 整理番号 | |  | | － |  | |  |  | |  | | | | | | | | | | | | | | | |  |  |  |
| ０．推薦団体名  （企業の所属する建設業者団体名） | | | | | | | | |  | | | | | | | | | | | | | | | | | | |  |
| 推薦団体  担 当 者 | | | ふりがな | | | | | | | | | 所属部署 | | | | | | | | | | | | 写真欄 | | | |  |
| 氏名 | | | | | | | | | TEL ( ) | | | | | | | | | | | |  | | | |  |
| FAX ( ) | | | | | | | | | | | | ・５cm×５cm | | | |  |
| E-mail | | | | | | | | | | | | | | | | | | | | | ・上半身正面 | | | |  |
| １．候補者に関する事項 | | | | | | | | | | | | | | | | | | | | | | | | ・写真の裏面には | | | |  |
|  | ふりがな | | |  | | | | | | | | | | | 性別 |  | | | | | | | | 候補者の氏名を記載 | | | |  |
|  | 氏 名 | | |  | | | | | | | | | | | | | | | | | | | | （表面に響かないように注意） | | | |  |
|  |  | | | |  |
|  | 生年月日 | | | 昭和 年 月 日 | | | | | | | | | 年　　　齢  (令和７年９月30日時点） | | | | | | | 満 歳 | | | | （令和７年 月撮影） | | | |  |
|  | 現 住 所 | | | （〒 - ） | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | TEL （ ） | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | 主たる担当職種 | | | | | 職種名 | | | | | | | | | | | | | CCUS登録状況 | | | | CCUS登録状況 | | | | |  |
|  | 最 終 学 歴 | | | | | 職　　　　　　　　　　　　　　　　　歴 | | | | | | | | | | | | | | | | | | | | | |  |
|  |  | | | | | 在 職 時 期 | | | | | | | | 在職期間 | | |  | | | |  | | | | 会社・職名 | | |  |
| 現場業務従事期間 | | | | | | | |
| 自 | | | | | 至 | | |  | | | | | 工事施工期間 | | |
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|  |  | | | | | 期間合計 | | | | | | | | 年　月 | | | 年　月 | | | | | 年　月 | | | (現職については、令和７年９月30日をもって終期とすること) | | |  |
| ２．所属会社に関する事項 | | | | | | | | | | | | | | | | | | （個人事業主の場合） | | | | | | | | | |  |
|  | ふりがな | | |  | | | | | | | | | | | | | | 名称 | | | | | | | | | |  |
|  | 会 社 名 | | |  | | | | | | | | | | | | | | 業　種 | | | |  | | | | | |  |
|  | 本社  所在地 | | | （〒 - ） | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | TEL （ ） | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | 候補者  所属部署  （住所・TELは本社と異なる場合のみ記入） | | | 部署名 | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | 所在地（〒 - ） | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | TEL （ ） | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | 加入団体 : | | | | | | | | | | | | | | | | | | | | | | | | | | |  |