**北京药学会会员登记表**

会员证号：

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 | | |  | | | | | | 姓名汉语拼音 | | |  | | | | | | 性 别 | | | |  | | | |
| 出生年月 | | |  | | | | | | 民 族 | | |  | | | | | | 党 派 | | | |  | | | |
| 专业及  专长 | | |  | | | | | | | | | | | | | | | 技术职称 | | | |  | | | |
| 单位名称 | | |  | | | | | | | | | | | | | | | 工作部门  及职务 | | | |  | | | |
| 单位地址 | | |  | | | | | | | | | | | | | | | 邮 编 | | | |  | | | |
| 身份证号 | | |  | | | | | | | | | | | | | | | | | | | | | | |
| 单位电话 | | |  | | | | | | 手 机 | | |  | | | | | | 邮 箱 | | | |  | | | |
| 毕业院校 | | | 院 校 名 称 | | | | | | | | | | | | | | | 学 历 | | | | | | | |
| 国 内 | | | | | |  | | | | | | | | |  | | | | | | | |
| 国 外 | | | | | |  | | | | | | | | |  | | | | | | | |
| 主  要  经  历 | | |  | | | | | | | | | | | | | | | | | | | | | | |
| 填表须知 | | | 1.表内各项请逐项详细填写，字迹清楚；  2.北京药学会会员的资格为药师及以上；  3.申请入会请务必在表后加盖本单位公章；  4.此表复印有效。 | | | | | | | | | | | | | | | | | | | | | | |
| 参加学术团体及任职情况 | | | | |  | | | | | | | | | | | | | | | | | | | | |
| 主要科研成果及著作 | | | | |  | | | | | | | | | | | | | | | | | | | | |
| 拟 参 加 本 学 会 专 科 学 会 活 动（√） | | | | | | | | | | | | | | | | | | | | | | | | | |
| 药物分析 | 药  物  流  通 | 制药工程 | | 基层药学 | | 中  药 | 智能药房 | 药物化学生物学 | | 抗生素 | 药物化学 | | 应用药理 | 抗肿瘤 | | 医院药学 | 天然药物 | | 药物分析 | 安全评价 | 老年药学 | | 药  剂 | 药物经济 | 医疗器械 | |
|  |  |  | |  | |  |  |  | |  |  | |  |  | |  |  | |  |  |  | |  |  |  | |
|  | 推荐单位意见 | | | | | | | | | | | | | | 批准单位意见 | | | | | | | | | | |
| 盖章  年 月 日 | | | | | | | | | | | | | | 盖章  年 月 日 | | | | | | | | | | |
| 备注 |  | | | | | | | | | | | | | | | | | | | | | | | | |

登记人

年 月 日