附件2

申请律师执业人员实习考核登记表

（“先实习、再考证”类）

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 |  | | | 性别 | | |  | | 民族 | |  | | 出生年月 | |  | | | 近期大一寸免冠蓝色底彩照1张 | |
| 政治面貌 |  | | | 学历 | | |  | | 学位 | |  | | 专业 | |  | | |
| 毕业院校 | | | |  | | | | | | | | | | | | | |
| 学历证书编号 | | | |  | | | | | | | | | | | | | |
| 学位证书编号 | | | |  | | | | | | | | | | | | | |
| 国家统一法律职业资格证书（国家统一司法考试合格证书、律师资格凭证）号码 | | | | | | | |  | | | | | | | | | | | |
| 档案存放地 | | |  | | | | | | | | | 存 档 号 | | |  | | | | |
| 户籍所在地 | | |  | | | | | | | | | 身份证号 | | |  | | | | |
| 现居住地 | | |  | | | | | | | | | | | | | | | | |
| 联系电话 | 固定电话 | | | | |  | | | | | | | 电子邮箱 |  | | | | | |
| 手机 | | | | |  | | | | | | |
| 指导律师姓名 | |  | | | | | 执业证号 | | |  | | | | | | 执业年限 | | |  |
| 实习所在律师事务所 | | | | |  | | | | | | | | | | 电话 | |  | | |
| 实习起止时间 | | | | | 年 月 日 至 年 月 日 | | | | | | | | | | | | | | |
| 集中培训学习成绩 | | | | |  | | | | | | | | | | | | | | |
| 实习人员实习期情况 | | | | | □合格 □不合格 | | | | | | | | | | | | | | |
| 主管律师协会意见：  单位盖章：  年 月 日 | | | | | | | | | | | | | | | | | | | |