

Appendix 3: Review Form for Exemption from Continuing Education Exam for Autonomous Region Professional and Technical Post Qualification

Name		Gender		Date of Birth	
Identification Card Number		Diploma		Degree(s)	
Graduation Date, School, and Field of Study					
Current Work Unit		Start Date of Employment			
Current Professional and Technical Post		Desired Professional and Technical Post			
Reason(s) for Test Exemption					
Examination and Opinion of Current Work Unit	<p align="right">Official Seal Person in charge: Year Month Day</p>				
Review and Opinion of the Same-Level Office of the Leading Group of "Visit, Benefit, Bring Together" Activities	<p align="right">Official Seal Year Month Day</p>	<p align="center">Review and Opinion of the Personnel Department (Title of Department) of the Responsible Regional Work Unit of the Prefecture/ Autonomous Prefecture/ Prefecture-Level City or Autonomous Region</p>	<p align="right">Official Seal Year Month Day</p>		