様式第5号

業務実施体制

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| ※本業務を行う場合の実施体制図参考例

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  | ○○担当者　氏名 |
|  |  |  |  | 　 |
|  |  |  |  | 　 | ○○担当者　氏名 |
| ○○管理者 | 　 | 主任担当者 | 　 | 　 |
|  |  | 　 | ○○担当者　氏名 |
|  |  |  |  | 　 |
|  |  |  |  | 　 | ○○担当者　氏名 |
|  |  |  |  |  |

 |
|  | フリガナ氏　　名 | 所属・役職名（経験年数） | 担当する業務内容等（資格免許等） |
| 管　理　者 |  |  |  |
| 主任担当者 |  |  |  |
| 担　当　者 |  |  |  |
|  |  |  |
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