附件

安龙县疾病预防控制中心（安龙县卫生监督站）招聘公益性岗位工作人员报名登记表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 |  | | | | 性 别 | | | | | |  | | | | 出生年月 | | | | | |  | | | 贴照片处 | |
| 政治面貌 |  | | | | 籍 贯 | | | | | |  | | | | 现户籍  所在地 | | | | | |  | | |
| 最高学历 |  | | | | 学 位 | | | | | |  | | | | 毕业时间 | | | | | |  | | |
| 毕业院校 |  | | | | | | | | | | | | | | 专 业 | | | | | |  | | |
| 通讯地址 |  | | | | | | | | | | | | | | 联系电话 | | | | | |  | | | | |
| 身份证号 |  |  |  |  | |  |  |  |  |  | |  |  |  | |  |  |  |  |  | |  | 婚姻情况 | |  |
| 学习经历  （高中填起） |  | | | | | | | | | | | | | | | | | | | | | | | | |
| 工作经历 |  | | | | | | | | | | | | | | | | | | | | | | | | |
| 个人特长 |  | | | | | | | | | | | | | | | | | | | | | | | | |
| 奖惩情况 |  | | | | | | | | | | | | | | | | | | | | | | | | |
| 备 注 |  | | | | | | | | | | | | | | | | | | | | | | | | |

本人声明：上述填写内容真实完整。如有不实，本人愿被取消聘用资格并承担一切法律责任。

招聘人员签名：

年 月 日