附件2

**山东泰山地勘集团有限公司公开招聘报名登记表**

**应聘岗位：**

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| 姓名 |  | | | | 性别 | |  | | | | 出生日期 | | |  | | | | 照片 | |
| 籍贯 |  | | | | 民族 | |  | | | | 婚育状况 | | |  | | | |
| 血型 |  | | | | 学历/学位 | |  | | | | 专业 | | |  | | | |
| 技术职称/职业资格 | | | | |  | | | | | | 政治面貌 | | |  | | | |
| 兴趣爱好/特长 | | | | |  | | | | | | 外语水平 | | |  | | | |
| 身份证号码 | | | | |  | | | | | | 联系电话 | | |  | | | |
| 户籍性质 | | | | |  | | | | | | 电子邮箱 | | |  | | | | | |
| 现居住地址 | | | | |  | | | | | | | | | | | | | | |
| 通信地址 | | | | |  | | | | | | | | | | | | | | |
| 紧急状况联系人 | | | | |  | | | | | 紧急联系人电话 | | | | |  | | | | |
| **家庭成员** | | | | | | | | | | | | | | | | | | | |
| 关系 | | 姓名 | | | | 年龄 | | 工作单位 | | | | | | | | 备注 | | | |
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| **教育经历（由最高学历开始填写）** | | | | | | | | | | | | | | | | | | | |
| 起止时间 | | | 毕业院校 | | | | | | | | | | 所学专业 | | | | | | 学历 |
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| **现工作单位聘用情况** | | | 单位名称 | | | | | |  | | | | 担任职务 | | | | | |  |
| 入职时间 | | | | | |  | | | | 合同到期时间 | | | | | |  |
| 是否调档 | | | | | | □是□否 | | | | 聘用形式 | | | | | |  |
| 未调档，档案所在地 | | | | | | | | | |  | | | | | | |
| **工作经历（由最近工作经历开始填写）** | | | | | | | | | | | | | | | | | | | |
| 起止时间 | | | 单位名称 | | | | | | 从事职位 | | | 离职原因 | | | | | 证明人及其联系方式 | | |
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| **是否与前工作单位签订有保密协议和竞业限制协议？否□是□，请说明情况：** | | | | | | | | | | | | | | | | | | | |
| **是否与原工作单位有未尽法律事宜：无□是□，请说明情况：** | | | | | | | | | | | | | | | | | | | |
| **受过何种奖励/处分：** | | | | | | | | | | | | | | | | | | | |
| **是否在外有兼职：否□是□，请说明情况：** | | | | | | | | | | | | | | | | | | | |
| **培训经历** | | | | | | | | | | | | | | | | | | | |
| 起止时间 | | | | 培训机构 | | | | 培训项目 | | | | | | | | | 证书 | | |
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| **健康信息** | | | | | | | | | | | | | | | | | | | |
| **是否从事过井下、高空、高温、特别繁重及有毒有害工种：否□是□，请说明情况：** | | | | | | | | | | | | | | | | | | | |
| **是否曾被认定为工伤：是□ 否□；**  **是否曾被鉴定具有伤残等级：否□ 是□，请说明情况：** | | | | | | | | | | | | | | | | | | | |
| **是否曾患传染疾病：否□是□，请说明情况** | | | | | | | | | | | | | | | | | | | |
| **是否有残疾：否□是□，请说明情况：** | | | | | | | | | | | | | | | | | | | |
| **最近六个月内是否有住院10天以上的记录：否□是□，请说明情况：** | | | | | | | | | | | | | | | | | | | |
| **其他信息** | | | | | | | | | | | | | | | | | | | |
| **参加工作时间：年月；累计工作时间：是否有连续工作12个月的事实：有□无□** | | | | | | | | | | | | | | | | | | | |
| **是否享受过婚假：是□否□** | | | | | | | | | | | | | | | | | | | |
| **是否处于三期中（怀孕期、产期、哺乳期）：否□是□，请说明情况：** | | | | | | | | | | | | | | | | | | | |
| **有否治安拘留15天及以上处罚：无□有□，请说明情况：** | | | | | | | | | | | | | | | | | | | |
| **是否有被刑事起诉或被判罪？无□有□，请说明情况：** | | | | | | | | | | | | | | | | | | | |
| **声明信息** | | | | | | | | | | | | | | | | | | | |
| **A、本人确认**：公司已经如实告知工作内容、工作地点、工作条件、职业危害、安全生产状况、劳动报酬以及员工要求了解的情况。  **B、本人承诺**：本人提供的个人信息、学历证明、资格证明、身份证明、工作经历等个人资料均属真实，本人充分了解上述资料的真实性是双方订立劳动合同的前提条件，如有弄虚作假或隐瞒的情况，属于严重违反公司规章制度，同意公司有权解除劳动合同或对劳动合同做无效认定处理，公司因此遭受的损失，本人有对此赔偿的义务。  **C、本人确认**：本表所填写的通信地址为邮寄送达地址，公司向该通信地址寄送的文件和物品，如果发生收件人拒绝签收或其他无法送达的情形的，本人同意，从公司寄出之日起视为公司已经送达。 | | | | | | | | | | | | | | | | | | | |
| 签字确认：年月日 | | | | | | | | | | | | | | | | | | | |