附表1：

**神木县医院院聘临时护理人员报名表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 | |  | | | | 身份证号 | | |  | |  |  | |  | |  |  | |  |  |  | |  | |  |  | |  |  | |  |  |  |  |
| 性别 |  | | 原始学历 | |  | | | 最高学历 | | | | |  | | | | | 最高学位 | | | | | |  | | |  | | | | | | | |
| 原始学历毕业院校 | | | |  | | | | | | | | | | 毕业时间 | | | | | |  | | | | | | |
| 最高学历毕业院校 | | | |  | | | | | | | | | | 毕业时间 | | | | | |  | | | | | | |
| 掌握外语  及程度 | |  | | | | | | | | 计算机掌握程度 | | | | | | | | |  | | | | | | | |
| 专业技术  职务 | |  | | | | | | | | 已考取有关资格 | | | | | | | | |  | | | | | | | | | | | | | | | |
| 政治面貌 | |  | | | | | 婚否 | | |  | | | | | 报考岗位 | | | | | | |  | | | | | | | | | | | | |
| 通讯地址 | |  | | | | | | | | | | | | | | | | | | | | 邮政编码 | | | | | | | |  | | | | |
| 联系电话 | |  | | | | | | | |  | | | | | | | | | | | | 户籍所在地 | | | | | | | |  | | | | |
| 简 历  （自高中起，时间到月） | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 工作或  社会实践  经 历 | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 奖 惩  情 况 | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 其他须  说明事项  或要求 | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**注意**：本表中所填内容以及所提供材料均真实有效，如有不实之处，责任自负。