2017年安康市镇（办）卫生院

（社区服务中心）考试报名表

报名序号： （由工作人员填写）

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 应聘单位 | | | | | |  | | | | | 应聘岗位 | | | | | | |  | | | | | | | 照片 | |
| 姓名 | |  | | | | | 身份证号 | | | |  | | | | | | | | | | | | | |
| 性别 | |  | | | | | 民 族 | | | |  | | | | 资格证 | | | | | |  | | | |
| 户籍所在地 | | | | |  | | | | | 生源所在地 | | | | | | | | |  | | | | | | | |
| 联系地址 | | | | |  | | | | | | | | | | | 联系电话 | | | | | | |  | | | |
| 教　育　背　景 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 项目  学历 | | | | 毕业学校 | | | | | 毕 业  时 间 | | | | 所学专业 | | | | | | | | | 学 历  层 次 | | 学位 | | 是 否  全日制 |
| 第一学历 | | | |  | | | | |  | | | |  | | | | | | | | |  | |  | |  |
| 最高学历 | | | |  | | | | |  | | | |  | | | | | | | | |  | |  | |  |
| 家庭主要成员及重要社会关系 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 称 谓 | | | 姓 名 | | | | | 年龄 | | | | 政治面貌 | | | | | | | | 工 作 单 位 及 职 务 | | | | | | |
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|  | | |  | | | | |  | | | |  | | | | | | | |  | | | | | | |
| **本人承诺：以上所填信息绝对真实，如有弄虚作假，取消资格，责任自负。**  本人签字： | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 审核人签字 | 年 月 日 | | | | | | | | | | | | | 备  注 | | |  | | | | | | | | | |

注：①报名序号由报名点工作人员填写，其他栏目由报考人员用汉字和数字填写；②“学历、所学专业、学位、资格”均应与毕业证、学位证、资格证一致；③“联系电话”应确保招聘期间全天畅通，因联系不上影响聘用所产生的后果，责任自负。