附件2：

莲前街道办事处招聘残疾人职业援助中心工作人员报名表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 |  | | | 性别 | |  | | | 民族 | | | | | | |  | 照片 |
| 政治 面貌 |  | | | 出生  年月 | |  | | | 婚姻  状况 | | | | | | |  |
| 身份证号 | | |  | | | | | 身体 状况 | | | | |  | | | |
| 户口所在区 | | |  | | 学历 | |  | | | 所学  专业 | | | |  | | | |
| 毕业院校 | | |  | | | | | | | | 特长 | | | |  | | |
| 家庭住址 | | |  | | | | 联系电话  （手机、固话） | | | | |  | | | | | |
| 个人简历 | | (从初中毕业后开始至今的学习、工作经历) | | | | | | | | | | | | | | | |
| 资格审查意见 | | 审核人签字：  街政办负责人签字：  街政办(盖章)  日期： | | | | | | | | | 审核人签字：  区残联(盖章)   日期： | | | | | | |