浦口区卫生监督所2017年公开招聘编外工作人员报名登记表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 姓 名 |  | | | | | | 性别 | |  | | | 出生  年月 | |  | | | | | | 民 族 | | | |  | | | | | 照  片 | |
| 身 份  证 号 |  |  |  |  | | |  |  | |  | |  |  |  | |  |  | |  | |  |  | |  | |  | |  |
| 户籍所在地 | 区          街道          派出所 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 现家庭  住  址 |  | | | | | | | | | | | | | | | | | | | 邮编 | | |  | | | | | |
| 学 历 |  | | | | 何时何  院校毕业 | | | | | | |  | | | | | | | | | | | 所学专业 | | | |  | | | |
| 学 位 |  | | | |
| 参加工作时间 | | | | |  | | | | | | | 婚姻状况 | |  | | | | | | | | | 政治  面貌 | | | |  | | | |
| 现工作单位 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| 联 系  电 话 | 手 机 | | | |  | | | | | | | | | | | | | 有何专长 | | | | | | |  | | | | | |
| 固定电话 | | | |  | | | | | | | | | | | | |
| 学习（高中起点）和工作  经历 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 家庭  成员  情况 | 姓 名 | | | | | 关 系 | | | | | 所在单位 | | | | | | | | | | | | | | | | | | | 职 务 |
|  | | | | |  | | | | |  | | | | | | | | | | | | | | | | | | |  |
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| 初审  意见 | 初审人（签名）：           年   月   日 | | | | | | | | | | | | | | 复审  意见 | | | | | 复审人（签名）：           年   月   日 | | | | | | | | | | |
| 备 注 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |