附件:

广州市增城区石滩镇三江敬老院招用聘员报名表

编号：

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 姓 名 |  | | 性 别 | | |  | | | | 出生年月 | | |  | | | 照 片 | | |
| 籍 贯 |  | | 民 族 | | |  | | | | 参加工作时间 | | |  | | |
| 政治面貌 |  | | | | | 参加党派时间 | | | | | | |  | | |
| 工作单位及职务 |  | | | | | | | | | | | | | | |
| 全日制  毕业院校 |  | | | | | | 学历学位 | | | |  | | 所学专业 |  | | | | |
| 专业技术  资格 |  | | | | | | | | | | 资格取得  时间 | | 年 月 日 | | | | | |
| 个人爱好及特长 |  | | | | | | | | | | | | 身高  （cm） | |  | | | |
| 住宅电话 |  | | | | 手 机 | | | |  | | | | 婚姻状况 | | |  | | |
| 通讯地址 |  | | | | | | | | | | | | 邮政编码 | | |  | | |
| 身份证号码 |  | | | | | | | | | | 邮 箱 |  | | | | | | |
| 主 要 学 习 经 历 | | | | | | | | | | | | | | | | | | |
| 起止年月 | | 学校及专业（从高中填起） | | | | | | | | | | | | | | | 学历 | |
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| 主 要 工 作 经 历 | | | | | | | | | | | | | | | | | | |
| 起止年月 | | 工作单位及职务 | | | | | | | | | | | | | | | | |
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| 家庭情况（配偶、子女、父母、岳父母、兄弟姐妹） | | | | | | | | | | | | | | | | | | |
| 称谓 | 姓名 | | | 出生年月 | | | | 现工作单位及职务 | | | | | | | | | | 政治面貌 |
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| 何时何地  受过何种  奖励或处分 |  | | | | | | | | | | | | | | | | | |
| 个人自我评价 |  | | | | | | | | | | | | | | | | | |
| 报名人员  承诺 | 我已详细阅读了招聘公告、岗位相关要求和填表说明，确信符合报考条件及职位要求。本人保证填报资料真实准确，如因个人填报信息失实或不符合报考条件和岗位要求而被取消考录资格的，由本人负责。  报考人员签名： 日期： 年 月 日 | | | | | | | | | | | | | | | | | |
| 审核意见 | 审核人员签名： 日期： 年 月 日 | | | | | | | | | | | | | | | | | |