附件

丽水市行政服务中心下属事业单位

公开招聘专业技术人员报名表

报考岗位：

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 |  | | 身份证号 | |  | | | | | | | | | 贴  一  寸  近  照 | |
| 性别 |  | | 出生年月 | |  | | 政治面貌 | | | |  | | |
| 民族 |  | | 婚姻状况 | |  | | 籍 贯 | | | |  | | |
| 学历  学位 | 全日制教 育 | |  | | | 毕业院校系及专业 | | | |  | | | | | |
| 在 职  教 育 | |  | | | 毕业院校系及专业 | | | |  | | | | | |
| 专业技术  资格证书 | 资格名称 | | | | | 取得时间 | | | | | | | | | |
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| 现工作单位及岗位 |  | | | | | | | | | | | | | | |
| 通讯地址 |  | | | | | | | 联系电话 | | | |  | | | |
| 学习  工作  简历 | 起止时间 | | | 工作（学习）单位及职务 | | | | | | | | | | | |
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| 家庭主要成员及社会关系 | 称谓 | 姓名 | | | 出生  年月 | | | | 政治  面貌 | | | | 工作单位及职务 | | |
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| 本人承诺：上述填写内容和提供的相关材料真实，符合招聘公告的报考条件，如有不实，本人自愿承担相应责任。  报名人（签名）： 2018年 月 日 | | | | | | | | | | | | | | | |
| 初审意见 |  | | | | | | | | | | | | | | |
| 审核意见 |  | | | | | | | | | | | | | | |