2020年磐安县事业单位引进人才报名表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **姓名** |  | | | **性别** | |  | **出生**  **年月** | | | | |  | | | **民族** | | | |  | | | | | 照片 | |
| **身份**  **证号** |  | | | | | | | | | | | **政治面貌** | |  | | | | | | | | | |
| **报考**  **单位** |  | | | | | | | | | | | | **岗位名称** | | | |  | | | | | | |
| **毕业**  **院校** |  | | | | | | | | **所学专业** | | | | |  | | | | | | | | **婚姻状况** | | |  |
| **工作 单位** | |  | | | | | | **参加工作时间** | | | | | |  | | | | | | | | | | | |
| **户籍所在地** | |  | | | | | | **学 历** | | |  | | | **学位** | | |  | | | | **毕业时间** | | | |  |
| **家庭 住址** | |  | | | | | | | | | | | | **本人联系电 话** | | | | | |  | | | | | |
| **家庭主要成员** | **姓 名** | | **关 系** | | **政治面貌** | | | | | **工作单位** | | | | | | **职 务** | | | | | | | **联系电话** | | |
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| **学习和工作简历** |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **报**  **名**  **信**  **息**  **确**  **认** | 本人已仔细阅读磐安县中药创新发展研究院引进事业编制人才公告及有关资料，承诺所填写的以上个人信息资料真实准确，若有虚假、遗漏、错误，责任自负。  **报考人签字**：  **代报人签字：**  **日期：** | | | | | | | | | | | | | **引才单位初审**  **意见** | | | | **审核人签字：**  **日 期：** | | | | | | | |
| **人事部门意 见** | **年 月 日** | | | | | | | | | | | | | | | | | | | | | | | | |

注：此表须用A4纸打印