**报名登记表**

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| **姓名** | |  | | **性别** |  | **出生年月**  **（）岁** | |  | **照片**  **（一寸）** | |
| **民族** | |  | | **籍贯** |  | **出生地** | |  |
| **入党**  **时间** | |  | | **参加工作时间** |  | **健康状况** | |  |
| **专业技术职务** | |  | | | **熟悉专业有何专长** |  | | |
| **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** | |  | | |
| **现单位名称** | | | |  | | | | | | |
| **现居住地址** | | | |  | | | | | | |
| **申报岗位名称** | | | |  | | | | | | |
| **是否服从调剂** | | | |  | | | **联系电话**  **（手机）** |  | | |
| **电子邮箱** | | | |  | | | | | | |
| **个人简历** （请从小学开始填写） |  | | | | | | | | | |
| **个人自述** |  | | | | | | | | | |
| **家庭主要成员** | **称谓** | | **姓名** | | **出生年月** | | **工作单位及职务** | | | **联系电话** |
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| **本人签字：** | | | | | | | | | | |