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| 姓名 |  | | | | 性别 | |  | | | 户籍所在街道 | | | |  | | | | | | 现居住地 | | | | |  | | | | | | | | | 照片 | | | | | |
| 出生  年月 |  | | | | 民族 | |  | | | 政治  面貌 | | | |  | | | | | | 文化程度 | | | | |  | | | | 婚姻状况 | | |  | |
| 毕业院校 |  | | | | | | | | | | | | | 所学专业 | | | | | |  | | | | | | | | | | | | | |
| 是否为应届大学毕业生 | | | 是否为随军家属 | | | | | | 是否大学生  村官 | | | | | | | | | 助理社会  工作师 | | | | | | | | | 社会工作师 | | | | | | |
| 是 | 否 | | 是 | | | | 否 | | 是 | | | | 否 | | | | | 是 | | | | 否 | | | | | 是 | | | | 否 | | | 照片 | | | | | |
| 毕业  时间 | |  | | | | | | | | 参加工作  时间 | | | | | | | | | | | | |  | | | | | | | | | | |
| 现工作单位及职务 | |  | | | | | | | | | | | | | | | 固定电话 | | | | | | | | 手机号码 | | | | | | | | |
|  | | | | | | | |  | | | | | | | | |
| 通讯  地址 | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 邮政编码 | | |  | | |
| 身份  证号 | | | |  | |  | |  | | |  |  | | |  |  | | |  | |  | | |  | |  | |  | |  | | |  | |  |  | |  |  |
| 简历  （从高中填起） | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 是否服从分配： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 本人保证为此表所填事项的真实性负责。  　　　　　　　　　　　　　　　　考生签字： | | | | | | | | | | 资格审查意见  （公章）  　　　　　审核人签名： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |