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| 姓名 | |  | | 身份证号 |  | |  |  |  |  | |  |  |  | | |  |  |  | |  |  |  |  | |  | |  |  | | 免冠  一寸  彩照 |
| 户口  所在地 | |  | | 民族 |  | | | | | | 性别 | | | |  | | | | | 政治  面貌 | | | | |  | | | | | |
| 学历 | |  | | | | | | | | | 毕业时间 | | | | |  | | | | | | | | | | | | | | |
| 现工作单位 | |  | | | | | | | | | 参加工作时间 | | | | |  | | | | | | | | | | | | | | | |
| 联系地址 | |  | | | | | | | | | | | | | | 移动电话 | | | | | | | | | | |  | | | | |
| 毕业院校 | |  | | | | | | | | | | | | | | 所学专业 | | | | | | | | | | |  | | | | |
| 人员类别 | | 在职□失业□ | | | | | | | | | | | | | | 婚姻状况 | | | | | | | | | | |  | | | | |
| 计算 | |  | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | |
| 奖惩情况 | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 工    作    经    历 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 家  庭  成  员  情  况 | 姓  名 | | 关  系 | | | 所在单位 | | | | | | | | | | | | | | | | | | | | | | | | 职  务 | |
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| **本人声明：上述填写内容真实完整。如有不实，本人愿承担一切法律责任。**  **申请人（签名）：                                                   年     月     日** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |