**南方医科大学珠江医院应聘表**

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| **基本**  **情况** | **应聘科室及岗位** | |  | | | | | | | 近期  小一寸蓝底相片 | | |
| **姓名** | |  | **性别** | |  | | **民族** |  |
| **出生年月** | |  | **是否已婚育** | |  | | **政治面貌** |  |
| **籍贯** | | 省 市 | | | | | **身高** |  |
| **现居住地址** | |  | | | | | | |
| **手机号码** | |  | | | **Email** | | |  | | | |
| **学习** **经历** | **起止时间** | | **毕业院校** | | | **专业** | | | **学制（年）** | | **学历** | **办学形式** |
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| **家庭成员** | **姓名** | **关系** | **出生年月** | | **民族** | | **学历** | | **工作单位及职务** | | **联系电话** | |
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| **本人工作经历** | **起止时间** | | **工作单位及职务** | | | | | | | | | |
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**说明：上述内容请务必如实填写，如有虚假，需承担由此引发的一切后果。**