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| 附件2：  永康市社会保险事业管理局编外人员招聘报名表 | | | | | | | | | |
| 姓名 |  | | 性别 |  | 出生年月 |  | | | 1寸照片 |
| 文化程度 |  | | | | 政治面貌 |  | | |
| 户籍所在地 | |  | | | | | | |
| 身份证号码 | |  | | | | | 联系电话 |  | |
| 毕业院校及其专业 | | | |  | | | 报考单位（岗位） |  | |
| 现家庭住址 | | | |  | | | | | |
| 个人简历（高中起） | 起止时间 | | | 学校或工作单位 | | | | | |
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| 配偶、父母、子女、同胞兄弟姐妹基本情况 | 关系 | 姓名 | | 工作单位及职务 | | | | | |
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| 本人受到各种奖励或处分 | |  | | | | | | | |