蠡县2019年公开招聘大学生村医报名表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 | |  | | | 性别 | |  | | | 出生年月 | | | |  | | |  | |
| 籍贯 | |  | | | 身份证号码 | | | |  | | | | | | | |
| 学历 | |  | | | 毕业学校 | | | |  | | | | | | | |
| 所学专业 | | |  | | | | 毕业时间 | | | | |  | | | | |
| 执业资格类别 | | | |  | | | | | | 执业证书号码 | | | | |  | | | |
| 现工作单位 | | |  | | | | | | | 参加工作时间 | | | | |  | | | |
| 工作年限 | | |  | | | 联系电话 | | | | |  | | | | | | | |
| 报考单位 | | |  | | | | | 报考岗位 | | | | |  | | | 是否服从分配 | |  |
| 个人简历 |  | | | | | | | | | | | | | | | | | |
| 奖惩情况 |  | | | | | | | | | | | | | | | | | |
| 招聘小组意见 | 签 字：    年   月   日（盖章） | | | | | | | | | | | | | | | | | |