**附件1：[河套街道卫生院公开招聘院前急救工作人员报名登记表](http://www.qdhitech.gov.cn/n28356009/upload/181213100855542737/181213101359510574.doc)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 |  | | | | | | | 性别 | | |  | | | | 出生年月 | | | | | | | |  | | | | | | | 贴 |
| 身份证号 |  |  |  |  | |  |  | |  |  | |  | |  | | |  |  | |  | | |  |  | |  | |  |  |
| 政治面貌 |  | | | | 学历及学位 | | | | | | | |  | | | | | | | | | 民族 | | |  | | | | | 照片 |
| 毕业院校  及时间 |  | | | | | | | | | | | 所学专业 | | | | | | | | |  | | | | | | | | | 处 |
| 岗位证件类别及号码： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 户籍所在地： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 现家庭地址 |  | | | | | | | | | | | 联系电话  （两个） | | | | | | | | |  | | | | | | | | | |
|  | | | | | | | | | |
| 报考岗位 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 本人简历 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 家庭成员及主要社会关系 | 称谓 | | | | 姓名 | | | | | | 出生日期 | | | | | | | | 政治面貌 | | | | | | | | 工作单位及职务 | | | |
|  | | | |  | | | | | |  | | | | | | | |  | | | | | | | |  | | | |
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| 承诺：本人符合报名条件要求，在报名表中填报的信息真实、准确。所提供的学历证书等相关证件均真实有效。如有弄虚作假或填写错误，由本人承担一切后果，并自愿接受有关部门的处理。  本人签名： 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 资格审查审核人签字： | | | | | | | | | | | | | | | | 复核人签字： | | | | | | | | | | | | | | |

注：本表格一式三份，必须申请人本人用深色钢笔、签字笔填写，并将身份证、资格证等相关报名资料复印件附后。