附件2:

**四川省科学城教育文化体育和旅游局**

**各中小学校2020年直接考核招聘教师报名登记表**

填表时间： 年 月 日

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| 姓　　名 | |  | | | | 性别 | |  | | 民族 | |  | | | 出生  年月 |  | | 照片 |
| 参加工作时间及工作单位 | |  | | | | | | | | | | | | | | | |
| 职称  技术等级 | |  | | | 职务 | | | |  | | | | 政治面貌  入党团时间 | | | |  |
| 籍贯 | | 省 市 县（区） | | | | | | | | | | | | | | | |
| 出生地 | | 省 市 县（区） | | | | | | | | | | | | | | | |  |
| 现最高  学历 | |  | | | | | | | | | | | | | | | 学位 |  |
| 毕业院校 | |  | | | | | | | | | | | | | | | 入学时间 |  |
| 所学专业 | |  | | | | | | | | | | | | | | | 毕业时间 |  |
| 应聘单位 | |  | | | | | | | | | | | | | | | 应聘岗位 |  |
| 原工作单位 | |  | | | | | | | | | | | | | | | 原主管部门 |  |
| 原单位性质、是否参保 | |  | | | | | | | | | | | | | | | 联系  电话 |  |
| 本人详细  住址及邮编 | |  | | | | | | | | | | | | | | | | |
| 身份证号码 | |  | | | | | | | 本人现户口  登记机关及性质 | | | | | | | |  | |
| 学习简历 | 从小学填起： | | | | | | | | | | | | | | | | | |
| 起止时间 | | 学历层次 | | | | | | | 所在学校 | | | | | | | | 毕（结）业 |
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| 工作简历 | 从参加工作填起： | | | | | | | | | | | | | | | | | |
| 起止时间 | | 所在单位 | | | | 岗位名称 | | | | 现任职职称  及评审时间 | | | | | | | 现专业技术岗位  等级及时间 |
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| 奖惩情况 |  | | | | | | | | | | | | | | | | | |
| 家庭主要成员 | 姓名 | | 性别 | 称谓 | | | 出生年月 | | | | | | | 政治面貌 | | | 现工作单位及职务、职称 | |
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| 本人签名确认 | 以上信息准确无误。  签字:  年 月 日 | | | | | | | | | | | | | | | | | |