**三亚农业投资集团有限公司**

**应聘人员登记表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 应聘部门 |  | | | | | 应聘岗位 | | | |  | | | | | | | 期望薪酬 | | | |  | | | 1寸近照 |
| 姓 名 |  | | | | | 性 别 | | | |  | | | | | | | 出生年月日 | | | |  | | |
| 籍 贯 |  | | | | | 身 高 | | | | cm | | | | | | | 体 重 | | | | kg | | |
| 邮 箱 |  | | | | | 民 族 | | | |  | | | | | | | 婚姻状况 | | | |  | | |
| 入党时间 |  | | | | | 参加工作时间 | | | |  | | | | | | | 专业技术职称 | | | |  | | |
| 联系电话 |  | | | | | | | | | 现 住 址 | | | | | | |  | | | | | | | |
| 学历  学位 | 全日制  教 育 | | | |  | | | | | 毕业院校  专 业 | | | | | | |  | | | | | | | |
| 在 职  教 育 | | | |  | | | | | 毕业院校  专 业 | | | | | | |  | | | | | | | |
| **如遇紧急情况，我授权公司可通知以下紧急联系人** | | | | | | | | | | | | | | | | | | | | | | | | |
| 紧急联系人姓名 | |  | | | | | | | | | | | 关系 | | | | | |  | | | | | |
| 地址 | |  | | | | | | | | | | | 联系电话 | | | | | |  | | | | | |
| **父母、配偶及子女情况** | | | | | | | | | | | | | | | | | | | | | | | | |
| 称谓 | | 姓名 | | | 出生年月 | | | | 政治面貌 | | | | | 工作单位及职务 | | | | | | | | | | |
|  | |  | | |  | | | |  | | | | |  | | | | | | | | | | |
|  | |  | | |  | | | |  | | | | |  | | | | | | | | | | |
|  | |  | | |  | | | |  | | | | |  | | | | | | | | | | |
|  | |  | | |  | | | |  | | | | |  | | | | | | | | | | |
|  | |  | | |  | | | |  | | | | |  | | | | | | | | | | |
| **受 雇 记 录** | | | | | | | | | | | | | | | | | | | | | | | | |
| 公司名称 | | | 电话号码 | | | | 职位 | | | | 入职时间 | | | | 离职时间 | | | | | 月薪 | | 具体离职原因 | | |
|  | | |  | | | |  | | | |  | | | |  | | | | |  | |  | | |
|  | | |  | | | |  | | | |  | | | |  | | | | |  | |  | | |
|  | | |  | | | |  | | | |  | | | |  | | | | |  | |  | | |
|  | | |  | | | |  | | | |  | | | |  | | | | |  | |  | | |
| **请列出前任雇主/直接上级咨询人，以便我们查询** | | | | | | | | | | | | | | | | | | | | | | | | |
| 姓名 | | | 公司 | | | | | 职位 | | | | | | | 电话号码 | | | | | | | 关系 | | |
|  | | |  | | | | |  | | | | | | |  | | | | | | |  | | |
|  | | |  | | | | |  | | | | | | |  | | | | | | |  | | |
|  | | |  | | | | |  | | | | | | |  | | | | | | |  | | |
| **健 康 状 况** | | | | | | | | | | | | | | | | | | | | | | | | |
| 您的健康状况如何？ | | | | 良好 尚可 较差 | | | | | | | | | | | | 我长期服药/治疗，因为： | | | | | | |  | |
| 您是否有残疾？如：肢体、视力、听觉（如有,请说明） | | | | | | | | | | | | | | | |  | | | | | | | | |
| 您曾否施手术或有严重病症？（如有,请说明） | | | | | | | | | | | | | | | |  | | | | | | | | |
| 女士请说明您现在是否怀孕 | | | | | | | | | | | | | | | |  | | | | | | | | |
| **其 他** | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | **是** | | | | **否** | | **如是，如实说明：** | | | | | | |
| 您曾否由于违纪被雇主开除？ | | | | | | | | | | | |  | | | |  | |  | | | | | | |
| 您是否曾因犯罪而被拘留或诉讼？ | | | | | | | | | | | |  | | | |  | |  | | | | | | |
| 目前，您是否受领养老金（退休金）或下岗费？ | | | | | | | | | | | |  | | | |  | |  | | | | | | |
| 您是否已缴纳五险一金？ | | | | | | | | | | | |  | | | |  | |  | | | | | | |
| 您是否违法过计划生育相关规定？ | | | | | | | | | | | |  | | | |  | |  | | | | | | |
| **正式声明** | | | | | | | | | | | | | | | | | | | | | | | | |
| 兹正式申明本人在此应聘登记表所填报之一切均属实，我已尽全力提供我的信息，并再次申明本人已公开此表所需提供的所有信息，决不隐瞒真实材料或任何可能影响我录用的信息。假如我被录用，本人将出示原单位真实有效的离职/任职证明，否则本人将承担由此给本单位带来的损失及向原单位的赔偿损失。此申明将成为本人雇用合同所必须的组成部分，如有隐瞒及虚报，本人愿意接受雇主的解雇处分。 | | | | | | | | | | | | | | | | | | | | | | | | |

**注：该申请表并不代表雇用。**

**填表人签名： 填表日期：**