椒江区社会保险事业管理中心

编外工作人员应聘登记表

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **姓名** |  | | **性 别** |  | **出生**  **年月** | |  | | 本  人  近  照 |
| **籍贯** |  | | **政治**  **面貌** |  | **民族** | |  | |
| **健康状况** |  | | **联系**  **电话** |  | **婚姻**  **状况** |  | | |
| **学历** |  | | **专 业** |  | **毕业院校** | | |  | |
| **现工作单位** |  | | | | **应聘岗位** | | |  | |
| **家庭住址** | |  | | | | | | | |
| **个人简历** |  | | | | | | | | |
| **家庭成员主要社会关系情况** |  | | | | | | | | |
| **奖惩情况** |  | | | | | | | | |
| **备注** |  | | | | | | | | |