附件

台州市殡仪馆招聘编制外工作人员报名表

填表时间： 年 月 日

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | 姓 名 |  | 性 别 |  | | 出 生  日 期 |  | 照  片  （1寸彩色） | | 民 族 |  | 籍 贯 |  | | 参加工作时间 |  | | 政 治  面 貌 |  | 身高 |  | | 婚 姻  状 况 |  | | 身份证  号 码 |  | | | | 联系  方式 |  | | | 最高学历学位 | 全日制 |  | | 毕业院校及专业 | |  | | | 在 职 |  | | 毕业院校及专业 | |  | | | 应聘岗位 | |  | | | | | | | 有何职业资格证书或特长 |  | | | | | | | | 个  人  简  历 |  | | | | | | |   本人声明：上述填写内容真实完整。如有不实，本人愿承担取消招聘资格的责任。  报考人签名： 年 月 日 |