**来宾市万和投资有限责任公司**

**应聘人员登记表**

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| 姓 名 |  | | | 性 别 | | | | |  | | 出生年月 | | | | |  | | | 文化程度 | | | | | | |  | | | | | | | | 照  片 | | | | | |
| 籍 贯 |  | | | 民 族 | | | | |  | | 政治面貌 | | | | |  | | | 职 称 | | | | | | |  | | | | | | | |
| 身 高 |  | | | 体 重 | | | | |  | | 婚姻状况 | | | | |  | | | 健康状况 | | | | | | |  | | | | | | | |
| 户口所在地 |  | | | | | 身份证号码 | | | | |  | |  |  |  | |  |  | |  | |  | |  |  | |  | | |  | | |  |  |  | |  |  |  |
| 毕业院校 |  | | | | | | | | | | | | | | | | | 专业 | | | | | | |  | | | | | | | | | | | | | | |
| 户籍地址 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 现居住地 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 联系电话 |  | | | | | | | | | | | 紧急联系人及电话 | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| **社会保险：** □ 新开户（未曾缴过社保）  □ 转入本公司（曾经缴纳过社保） 年 月 日开始参保（包含私人参保）  □ 上家参保机构  □ 目前保险状态：养老 失业 工伤 医疗 生育 （①已办停②已办转出③正缴纳）  是否办理过医保卡： □办理过 □未办理过 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **教 育 经 历** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 时 间 | | | | | | | 就读院校 | | | | | | | | | | | | | | | | 学 历 | | | | | | | | 专 业 | | | | | | | | |
| 年 月 至 年 月 | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |
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| 年 月 至 年 月 | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | |  | | | | | | | | |
| **主 要 家 庭 成 员** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 姓名 | | 关系 | | | | | | 工作单位及职务 | | | | | | | | | | | | | | | | | | | | | 联系电话 | | | | | | | | | | |
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| **工作经历（请从最先工作经历开始）** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 工作时间 | | | 地点 | | | | | | | 公司名称 | | | | | | | | | | | 职务 | | | | | | | | | | | 证明人及电话 | | | | | | | |
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| **相关执业资格证书/职称证书** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 起止时间 | | | | | 获得证书 | | | | | | | | | | | | | | | | | | | | | | | 颁发机构 | | | | | | | | | | | |
| 年 月至 年 月 | | | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
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| 年 月至 年 月 | | | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| **受 训 经 历** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 受训时间 | | | | | 培训机构 | | | | | | | | | | | 受训内容 | | | | | | | | | | | | | | | | | | | | 受训结果 | | | |
| 年 月至 年 月 | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |  | | | |
| 年 月至 年 月 | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |  | | | |
| ▲本人承诺：申请表中我所提供的情况是正确的、属实的，公司已向我说明提供假证后果的严重性，我同意并接受公司对本人提供的信息进行调查。因本人提供的相关材料有弄虚做假而造成一切后果均由本人承担，与公司无关。同时，我保证遵守公司招聘有关规程和国家有关法规。  填表人签名：  年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |