**附件二：**

**高平神农康复医院**

**2021年招聘工作人员报名表**

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| 应聘岗位： | | | | | | | | | | | | | | | | |
| 一、基本情况 | | | | | | | | | | | | | | | | |
| 姓 名 |  | | | 性 别 | |  | | 民 族 | | |  | | | 照片 | | |
| 出生年月 |  | | | 籍 贯 | |  | | 政治面貌 | | |  | | |
| 外语（语种） |  | | | 等 级 | |  | | 取得时间 | | |  | | |
| 户口所在地 |  | | | | | | | 身份证号码 | | |  | | | | | |
| 学历及学位 |  | | | 毕业时间 | |  | | 学校及专业 | | |  | | | | | |
| 通讯地址 |  | | | | | | | | | | 邮 编 | | |  | | |
| 联系电话 |  | | | | | | 电子信箱 | | | |  | | | | | |
| 二、教育经历 | | | | | | | | | | | | | | | | |
| 起止年月 | 毕业院校 | | | | | 所学专业 | | | | | 学历/学位 | | | | | 培养方式 |
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| 三、工作经历 | | | | | | | | | | | | | | | | |
| 起止年月 | 主要经历 | | | | | | | 成果或奖项 | | | | | | | 证明人 | |
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| 四、专业技能及特长（资格认证等） | | | | | | | | | | | | | | | | |
| 系列 | | 职称 | | | 专业 | | | | 职称等级 | | | 授予单位 | | | 评定时间 | |
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| 五、奖惩情况 | | | | | | | | | | | | | | | | |
| 时 间 | | | 内容 | | | 个人/集体 | | | | 颁发单位 | | | 具体原因 | | | |
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| 六、家庭情况及社会关系（直系亲属必填） | | | | | | | | | | | | | | | | |
| 姓 名 | 与本人关系 | | | 出生年月 | | 工作单位 | | | | | | | | 职务/岗位 | | |
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| 七、诚信承诺 | | | | | | | | | | | | | | | | |
| 1. 本人承诺保证所填写资料真实，并自愿承担因隐瞒事实而带来的包括解聘等一切后果。  2. 本人身份证、毕业证、职称证书等有效证件和职业技能等级证书、获奖证书等均为原件扫描件或复印件。  本人签名：  日 期： | | | | | | | | | | | | | | | | |