**新县机关事务中心公开招聘**

**应聘 （岗位）报名表**

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| **姓 名** |  | | | **性 别** |  | | | | **出生年月**  **( 岁)** | |  | **照 片** |
| **民 族** |  | | | **籍 贯** |  | | | | **出 生 地** | |  |
| **政治**  **面貌** |  | | | **婚姻**  **状况** |  | | | | **健康**  **状况** | |  |
| **职称**  **职务** |  | | | | **熟悉专业有何特长** | | | |  | | |
| **毕业院校及专业** |  | | | | | | | | | | | |
| **身份证号码** |  | | | | | | | **联系电话** | | |  | |
| **通讯**  **地址** |  | | | | | | | | | | | |
| **简**  **历** |  | | | | | | | | | | | |
| **主**  **要**  **家**  **庭**  **成**  **员**  **及**  **社**  **会**  **关**  **系** | | **称谓** | **姓名** | | | **出生**  **年月** | **政治**  **面貌** | | | **工作单位及职务** | | |
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| **是否同意调剂岗位** | |  | | | | | | | | | | |
| **应聘者**  **签字** | | **本报名表所填内容正确无误，所提交的信息真实有效，如有虚假，本人愿承担由此产生的一切后果。**  **应聘者签名：**  **年 月 日** | | | | | | | | | | |
| **资格**  **审查**  **意见** | | **审核人(签名)：**  **年　月　日** | | | | | | | | | | |