**应聘人员登记表**

**应聘岗位：**              填表日期：      年    月   日

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓  名 |  | | | 曾 用 名 | | |  | | | 性  别 | | | | | | |  | | | | | | | 一寸彩色照片 | |
| 年  龄 |  | | | 籍    贯 | | |  | | | 民  族 | | | | | | |  | | | | | | |
| 婚姻状况 |  | | | 身高(M) | | |  | | | 联系电话 | | | | | | |  | | | | | | |
| 学  历 |  | | | | | | 健康状况 | | | 职业病.残疾.隐疾等  □是 □否 | | | | | | | | | | | | | |
| 紧急联络人 | |  | | | | | 紧急联络电话 | | | | |  | | | | | | | | | | | |
| 身份证号码 | |  | | | | | 户籍地址 | | | | |  | | | | | | | | | | | | | |
| 起止日期 | | | 毕业院校 | | | | | 专业 | | | | | | | 所获学历 | | | | | 教育性质 | | | | | |
| 至 | | |  | | | | |  | | | | | | |  | | | | | □全日制 □自考 □其他 | | | | | |
| 至 | | |  | | | | |  | | | | | | |  | | | | | □全日制 □自考 □其他 | | | | | |
| 至 | | |  | | | | |  | | | | | | |  | | | | | □全日制 □自考 □其他 | | | | | |
| 工作时间 | | | 公司名称 | | | | | 职务 | | | | | | | 离职原因 | | | | | | | | | | |
| 至 | | |  | | | | |  | | | | | | |  | | | | | | | | | | |
| 至 | | |  | | | | |  | | | | | | |  | | | | | | | | | | |
| 家庭成员 | | | 关系 | | | 职业 | | 住址 | | | | | | | | | | | | | | 联系电话 | | | |
|  | | |  | | |  | |  | | | | | | | | | | | | | |  | | | |
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| 原单位劳动关系解除或终止 | | | | | □是 □否 £其他情况： | | | | | | | 应聘信息来源 | | | | | | □康保政府网  □康保众邦人力资源公司网站   □          □其他 | | | | | | | |
| 能否加班 | □接受 □不接受 | | | | 能否出差 | | □接受 □不接受 | | | | | 是否接受工作地点或职务调动 | | | | | | | | | | | | □接受 □不接受 | |
| **应 聘  申 明**  ＊本人证实所填写和提供的各项应聘资料内容的真实性，并无掩饰任何不利申请此职位之资料；同时允许公司对以上所填内容进行调查，如有虚假，本人自愿承担因隐瞒而带来的一切后果（包括不限于因提供虚假信息而视为严重违纪并解除劳动合同），并不要求给予任何赔偿。  ＊本人在进入贵公司时未与其他单位保持劳动关系或存在约定竞业约定的情况。如给贵公司带来损失，本人自愿承担由此造成的相应赔偿和损失。  **应聘者签名确认**：\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  |  |  |  |  |  |  | |  | |  | |  |  | |  | | |  | |  | |  | |  | |