附件2

**清河县城西医院2021年公开招聘报名表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **报名序号： 报考岗位： 报考岗位代码：** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|
| **姓名** |  | | | | | | | | | **性别** | | | | | |  | | | | | | | |  | | | | | |
| **籍贯** |  | | | | | | | | | **身份证号** | | | | | |  | | | | | | | |
| **政治**  **面貌** |  | | | | | **婚姻**  **状况** | | | | **否** | | | | **民族** | | |  | | | | | | |
| **身高** |  | | | | | **血型** | | | |  | | | | | | | | | | | | | |
| **健康**  **状况** |  | | | | | **手机**  **号码** | | | |  | | | | | | | | | | | **住宅电话** | | |  | | | | | |
| **本人目前住址：** | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| **紧急联系人、电话**  **及地址：** | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| **教育**  **经历（自初中起）** | **时间** | | | | **毕业学校** | | | | | | | **所学专业** | | | | | | **学历** | | | | **是否为普通全日制统招学历** | | | | | | | **是否为高中起点** |
|  | | | |  | | | | | | |  | | | | | |  | | | |  | | | | | | |  |
|  | | | |  | | | | | | |  | | | | | |  | | | |  | | | | | | |  |
|  | | | |  | | | | | | |  | | | | | |  | | | |  | | | | | | |  |
|  | | | |  | | | | | | |  | | | | | |  | | | |  | | | | | | |  |
|  | | | |  | | | | | | |  | | | | | |  | | | |  | | | | | | |  |
| **工作**  **经历（自实习起）** | **时间** | | | | **所在单位** | | | | | | | | | | | **所在科室及职务** | | | | | | **证明人** | | | | | | | |
|  | | | |  | | | | | | | | | | |  | | | | | |  | | | | | | | |
|  | | | |  | | | | | | | | | | |  | | | | | |  | | | | | | | |  |
|  | | | |  | | | | | | | | | | |  | | | | | |  | | | | | | | |
| **执业**  **情况** | **是否执业** | | |  | | | | **执业范围** | | | | |  | | | | | | **执业证书**  **编号** | | | | | |  | | | | |
| **取得时间** | | | | |  | | | | | | | | | | | | | | **执业地点** | | | | | | | |  | |
| **职称**  **情况** | **现任职称** | | | | | | | | | |  | | | | | | | | | **取得职称时间** | | | | | |  | | | |
| **社会**  **关系** | **姓名** | | **关系** | | | | | | **年龄** | | | **所在单位** | | | | | | | | | | | **职务** | | | | **联系电话** | | |
|  | |  | | | | | |  | | |  | | | | | | | | | | |  | | | |  | | |
|  | |  | | | | | |  | | |  | | | | | | | | | | |  | | | |  | | |
| **诚信**  **承诺** | **本报名表所填写的信息准确无误，所提交的证件、资料和照片真实有效，若有虚假，所产生的一切后果由本人承担。**  **报名人（签名）：**  **年 月 日** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **资格审查**  **人 员**  **确认签字** | | **年 月 日** | | | | | | | | | | | | | **主管领导**  **确认签字** | | | | | | | **年 月 日** | | | | | | | |

注：1、本表一式1份；

2、任何栏目内容涂改无效；

3、“诚信承诺”一栏需报考人对填报信息及所提供的证件资料确认真实有效，一旦通过笔试考试，在资格复审环节需报考人提供亲笔签字并按手印的该报名表。