附件1

**考生健康状况登记表**

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| 姓名 |  | | | | 性别 | | | |  | 身份证号 |  | |
| 户口所属市县 | | | |  | | | 现居住  详细地址 | | |  | | |
| 是否接种疫苗 | | |  | | | | | | 准考证号 | | |  |
| 报考岗位 | | |  | | | | | | 联系电话 | | |  |
| 健康状况记录 | | | | | | | | | | | | |
| 时间 | | 体温 | | | | 测量地点 | | 测量人 | | 健康  状况 | 当日行程 | |
| 早 | | 晚 | |
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| 健康结论 | |  | | | | | | 考生签字 | | |  | |

邮件名称为：姓名+报考岗位（例如：张三初中数学）