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| **一、基本情况** | | 申请人姓名 | | | |  | | | | | | 性别 | |  | | 出生年月 | | |  | | | | 照片  （必填） | | |
| 政治面貌 | | | |  | | | | | | 民族 | |  | | 籍贯 | | |  | | | |
| 毕业院校 | | | |  | | | | | | 最高学位 | | | |  | | | | | | |
| 现工作单位 | | | |  | | | | | | 职称/职务 | | | |  | | | | | | |
| 联系电话 | | | |  | | | | | | 电子邮件 | | | |  | | | | | | |
| 应聘岗位 | | | |  | | | | | | 应聘单位 | | | |  | | | | | | | | | |
| **二、学习经历**  （从本科填起） | | 起止时间 | | | | 学校名称 | | | | | | | | | | 专业 | | | | | | | 获得学位 | | |
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| **三、工作经历**  （时间应连续） | | 起止时间 | | | | 工作单位 | | | | | | | | | | 职称/职务 | | | | | | | | | |
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| **四、近五年代表性成果信息汇总 （每一类别限填3项， 3项以上可另附页，所填内容应附证明材料）** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **（一）发表论文、出版专著情况** | | | | | | | | | | | | | | | | | | | | | | | | | |
| 题目 | | | | | | | | | | | 论文/专著 | | | | 期刊/出版社名称 | | | | | 发表/出版年月 | | | | 角色排名 | |
| (1) | | | | | | | | | | |  | | | |  | | | | |  | | | |  | |
| (2) | | | | | | | | | | |  | | | |  | | | | |  | | | |  | |
| (3) | | | | | | | | | | |  | | | |  | | | | |  | | | |  | |
| **（二）主持或参加科研课题情况** | | | | | | | | | | | | | | | | | | | | | | | | | |
| 项目名称 | | | | 项目来源 | | | | | | 起止时间 | | | | | | | 经费数额  （单位：万元） | | | | 本人排名或承担份额 | | | | |
| (1) | | | |  | | | | | |  | | | | | | |  | | | |  | | | | |
| (2) | | | |  | | | | | |  | | | | | | |  | | | |  | | | | |
| (3) | | | |  | | | | | |  | | | | | | |  | | | |  | | | | |
| **（三）授权专利情况** | | | | | | | | | | | | | | | | | | | | | | | | | |
| 专利名称 | | | | | | | 专利类型 | | | | 专利号 | | | | 批准机构 | | | | 批准时间 | | | | | 本人排名 | |
| (1) | | | | | | |  | | | |  | | | |  | | | |  | | | | |  | |
| (2) | | | | | | |  | | | |  | | | |  | | | |  | | | | |  | |
| (3) | | | | | | |  | | | |  | | | |  | | | |  | | | | |  | |
| **（四）获得省部级及以上教学/科研奖励情况** | | | | | | | | | | | | | | | | | | | | | | | | | |
| 奖励名称 | | | | | | | | 奖励部门 | | | | | 奖励级别 | | | | | 获奖时间 | | | | 本人排名 | | | |
| (1) | | | | | | | |  | | | | |  | | | | |  | | | |  | | | |
| (2) | | | | | | | |  | | | | |  | | | | |  | | | |  | | | |
| (3) | | | | | | | |  | | | | |  | | | | |  | | | |  | | | |
| **（五）获得校级以上奖励情况** | | | | | | | | | | | | | | | | | | | | | | | | | |
| (1) | | | | | | | | | | | | | | | | | | | | | | | | | |
| (2) | | | | | | | | | | | | | | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | | | | | | | | | | | | | | |
| **五、家庭成员**  （直系亲属及配偶） | | | **姓名** | | **与本人关系** | | | | **工作单位** | | | | | | | | | | | | | | | | **职务** |
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| 表中所填信息和提供材料均属实。如与事实不符，本人愿承担一切责任。  申请人本人签字： 年 月 日  经审核查验，申请人所填信息和提供材料真实无误。  单位审核人签字： 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | |
| **六、用人单位考核意见** | **政治思想考察结果：合格（ ）不合格（ ）**  **专业技术能力考核结果：优（ ）良（ ）中（ ）差（ ）**  **建议聘用到 岗位。**  二级党委书记签字： 行政负责人签字：  单位 （公章） 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | |
| **七、实验设备处意见** | （实验技术岗位填写）  负责人签字（公章） 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | |
| **八、人力资源部意见** | 心理测试结果：通过（ ）不通过（ ） | | | | | | | | | | | | | | | | | | | | | | | | |
| 经办人： 负责人签字（公章） 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | |
| **九、**  **分管校领导** | 同意人力资源部意见。  分管校领导签字： 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | |
| **十、**  **校长办公会** | 经 年 月 日 次校长办公会通过。  校长（签章）（公章） 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | |