**佛山市中医院应聘登记表**

应聘单位：佛山市中医院 年 月 日填

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| 姓名 |  | | | 性别 |  | | 出生日期 | | | | |  | | | | | | 民族 | |  | | | | 学历 | |  |
| 别名 |  | | | 生源 |  | | 婚否 | | |  | | | 籍贯 | |  | | | 政治面貌 | | | | |  | | 身高 |  |
| 家庭详细地址 | | | |  | | | | | | | | | | | | | | | | | | 农业或非农户口 | | | |  |
| 现户口地址 | | | |  | | | | | | | | | | 身份证号或其它证件号 | | | | |  | | | | | | | |
| 毕业院校 | | | 年 月毕业于 专业： 学制： | | | | | | | | | | | | | | | | | | | | | | | |
| 何时取得何种  职业资格证书 | | | |  | | | | | 外语水平 | | | |  | | | 应聘  岗位 | | | |  | | | | | | |
| 简  历 | 何时起 | | | 何时止 | | 在何地学校读书或工作（工作前全日制学历起） | | | | | | | | | | | | | | | | | | | | |
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| 配偶 | 姓名 | | |  | | 性别 | |  | | | 出生年月 | | | | | |  | | | | 参加工作时间 | | | |  | |
| 单位 | | |  | | | | | | | | | | | | | | | | | 职务 | | | |  | |
| 家庭主要成员 | 姓名 | | | 关系 | | 年龄 | | 工作单位或住址 | | | | | | | | | | | | | 职务 | | | | 联系电话 | |
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| 备注 | | **承诺：本人保证我所提供以及所填的资料均属实，如有隐瞒真实或虚假的，合同自始至终无效，本人愿承担一切责任；同意受权单位对本人作背景调查，包括履历表或登记表等提及的所有情况。单位的任何通知，若以信函形式寄至上述地址即视为送达给本人，而不论本人是否收到。若上述资料发生变更，本人将3天内如实书面告知单位，否则一切后果概由本人负责。**  **填表人： 日期：** | | | | | | | | | | | | | | | | | | | | | | | | |

1. 请附学历证书、毕业证书等复印件。
2. 现在通讯地址：

邮政编码： 电话： 联系人：