**厦门市海员培训中心公开招聘人员报名登记表**

应聘岗位：

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 | |  | | | 性别 | |  | 出生年月 |  | | 照片 |
| 学历/学位 | |  | | | 婚否 | |  | 民 族 |  | |
| 所学专业 | |  | | | 毕业院校 | | |  | | |
| 居住所在地 | |  | | | 户籍所在地 | | |  | | |
| 政治面貌 | |  | | | 身份证号码 | | |  | | | |
| 参加工作时间 | |  | | | 健康状况 | | |  | | 手 机 |  |
| 联系电话 | |  | | | E-mail | | |  | | |  |
| 联系地址 | |  | | | | | | | | | |
| 个 人 经 历 | 起止时间 | | 学校/工作单位 | | | | | | | | |
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| 家庭成员情况 | 姓 名 | | 关系 | 年龄 | | 文化程度 | | 现工作单位/职务 | | | |
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| 本人对上述填报信息的真实性负责，如与事实不符，一切后果自负。  签名： 年 月 日 | | | | | | | | | | | |
| 审查意见 | 年 月 日 | | | | | | | | | | |