附件2

**招聘工作人员报名登记表**

**报考岗位：**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 |  | | | 性别 | |  | | 出生年月 | |  | | | | | | 二寸彩照  数码彩照 |
| 身份证号码 | |  | | | | | | 联系方式 | |  | | | | | |
| 政治面貌 | |  | | | | 民族 | |  | 籍贯 | |  | | | | |
| 学历 |  | | 学位 | | |  | | | 专业 | |  | | | | |
| 毕业时间、院校  （最高学历） | | | |  | | | | | | | | | | | |
| 工作单位及职务 | | | |  | | | | | | | | | | | | |
| 通讯地址 | |  | | | | | | | | | | 邮编 | | |  | |
| 紧急联系人（直系亲属） | |  | | | | | | | | 紧急联系  电话 | | | | |  | |
| 职称/执业资格 | | （可多填） | | | | | | | | | | | | | | |
| 申请职位 | |  | | | | | | | | 同意□或不同意□ 调剂岗位 | | | | | | |
| 有何特长 | |  | | | | | | | | 身体状况 | | | |  | | |
| 档案保管  机构及地址 | |  | | | | | | | | | | | | | | |
| 奖惩情况 | |  | | | | | | | | | | | | | | |
| 主要简历  （何年何月至何年何月在何学校学习、何单位工作、任何职务） | | 格式：XX年X月X日-XX年X月X日，在XX学习XX专业学习（从高中填起） | | | | | | | | | | | | | | |
| 家庭主要成员及重要社会关系 | | 称谓 | | | 姓名 | | 出生年月 | | | 政治面貌 | | | 工作单位及职务 | | | |
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| 其他需要  说明的事项 | |  | | | | | | | | | | | | | | |
| 承  诺 | | 本人提供的证书和个人证明材料如有虚假，愿被取消招聘资格。  签名（盖章）： 年 月 日 | | | | | | | | | | | | | | |