附件2

广西壮族自治区 河池 市就业见习申请表

**（申请见习人员填写）**

申请见习单位： 填表日期： 年 月 日

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 | |  | | 性别 | |  | | 出生日期 | | |  | | |  | | |
| 毕业时间 | |  | | 籍贯 | |  | | 政治面貌 | | |  | | |
| 健康状况 | |  | | 民族 | |  | | 婚姻状况 | | |  | | |
| 学历及证书编号 | |  | | | | | | 身高 | | |  | | |
| 学位及证书编号 | |  | | | 身份证号码 | | |  | | | | | |
| 毕业院校及专业 | |  | | | | | | | | | | | | | | |
| 外语能力 | |  | | | 有何特长 | | | |  | | | | | | | |
| 户籍地址 | |  | | | | | | | | | | | | | | |
| 现住址 | |  | | | | | | | | | | | | | | |
| 移动电话 | |  | | | 其他联系方式 | | | | |  | | 电子邮箱 | | |  | |
| 主要  家庭  成员  情况 | | 亲属姓名 | | | 关系 | | 出生年月 | | | 工作单位 | | | 职务 | | | 联系电话 |
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| 证书类别 | | | 之一 | | | | | | | 之二 | | | 之三 | | | |
| 计算机证书 | | | NIT | | | | | | |  | | |  | | | |
| 外语证书 | | |  | | | | | | |  | | |  | | | |
| 其它资格证书 | | |  | | | | | | |  | | |  | | | |
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| 受教育及工作经历 | 起止时间 | | 院校/专业或工作单位/岗位 | | | | | | | | | | 担任职务 | | | |
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|  | |  | | | | | | | | | |  | | | |
| 在校奖  惩情况 |  | | | | | | | | | | | | | | | |
| 社 会  工 作  经 历 | 无 | | | | | | | | | | | | | | | |
| 承 诺 | 本人承诺对以上信息的完整性、真实性和准确性负责。    承诺人签名： 2024 年 月 日 | | | | | | | | | | | | | | | |