**2019年昆山市淀山湖人民医院和昆山市淀山湖镇社区卫生服务中心公开招聘合同制卫生专业技术人员报名登记表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 |  | | | | | | | 性别 | | | | |  | | | 出生  年月 | | | | |  | | | | | | （贴照片处） | | | | | | |
| 民族 |  | | | | | | | 户籍  （生源）地 | | | | |  | | | 政治  面貌 | | | | |  | | | | | |
| 毕业  院校 |  | | | | | | | | | | | 毕业时间 | | | |  | | | | | | | | | | |
| 现工作单位及岗位 | | |  | | | | | | | | | 参加工作时间 | | | |  | | | | | | | | | | |
| 学历 | |  | | | | | | | | | | | 学位 | | |  | | | | | | | | | | |
| 所学  专业 |  | | | | | | | | | | | | 职称及其他资格 | | |  | | | | | | | 档案关系所在地 | | | | |  | | | | | |
| 身份  证号 |  | | |  | |  |  | |  |  | | |  |  |  | | |  |  | | |  | |  | |  | | | |  |  |  |  |
| 通信  地址 |  | | | | | | | | | | | | | | | | | | | 邮政  编码 | | | | |  | | | | | | | | |
| 联系电话 | | | | |  | | | | | | 手机号码 | | | | | | | | |  | | | | | | | | | | | | | |
| 报考单位 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 报考岗位名称 | | | | |  | | | | | | | | | | | | 报考岗位代码 | | | | | | | | | | | |  | | | | |
| 工作简历 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **报名者承诺：以上信息真实，无隐瞒、虚假或重复报名等行为；所提供的应聘材料和证书（件）均为真实有效；不存在须回避的关系。如有虚假，本人愿承担一切责任。本人已确认以上填报的报名信息准确无误，并对填报内容负责。**  **报名者（代报名者）签名：**  **2019年 月 日** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **招聘初审意见： 审查者签名： 2019年 月 日** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |