附件**：**

响水县招聘公共服务公益性岗位人员报名表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 |  | | | 身份  证号 |  |  |  |  |  |  |  |  |  | |  |  | |  |  |  | |  |  |  |  | 照片 |
| 性别 |  | | | 出生年月 |  | | | | 籍贯 | | |  | | | | | 政治  面貌 | | | |  | | | | |
| 学历  学位 | 全日制  教 育 | | |  | | | | | 毕业院校及专业 | | | | |  | | | | | | | | | | | |
| 在 职  教 育 | | |  | | | | | 毕业院校及专业 | | | | |  | | | | | | | | | | | |
| 专业技术职务 |  | | | | | | | | | | | 健康状况 | | | | | | |  | | | | | | | |
| 现住址（详细至门牌号） | | |  | | | | | | | | | 联系电话 | | | | | | |  | | | | | | | |
| 个人  简历  (从初中起) | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| 报考人员承诺签名 | | 本人已仔细阅读招聘公告，承诺所填写的个人信息和所提供的资料真实准确，如果由于填写个人信息或提供资料不准确、不真实而导致不能正常参加考试或取消聘用资格等情况，则由本人承担全部责任。  承诺人（签字）： 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | |
| 审核  意见 | | 审核人（签名）： 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | |
| 备注 | |  | | | | | | | | | | | | | | | | | | | | | | | | |