宜宾市健康教育发展集团有限责任公司招聘人员报名表

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| 基本信息栏 | | | | | | | | | | | | | | | | |
| 姓 名 |  | | | 应聘岗位 | | | | |  | | | | | | 请粘贴电子一寸相片 | |
| 出生年月 |  | | | 年 龄 | | | | |  | | | | | |
| 性 别 |  | | | 民 族 | | | | |  | | | | | |
| 政治面貌 |  | | | 加入时间 | | | | |  | | | | | |
| 身 高 |  | | | 体 重 | | | | |  | | | | | |
| 身份证号码 |  | | | | | | | | | | | | | | | |
| 婚姻状况 |  | | | | 首次参加  工作时间 | | | | |  | | | | | | |
| 本人联系  电话 |  | | | | 紧急联系人及电话 | | | | |  | | | | | | |
| 家庭住址 |  | | | | | | | | | | | | | | | |
| 学历信息栏(从高中开始填写） | | | | | | | | | | | | | | | | |
| 入学时间 | 毕业时间 | | | 所在学校 | | | 所学  专业 | | 学历 | | | 学位 | | | | |
| 年 月 | 年 月 | | |  | | |  | |  | | |  | | | | |
| 年 月 | 年 月 | | |  | | |  | |  | | |  | | | | |
| 年 月 | 年 月 | | |  | | |  | |  | | |  | | | | |
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| 学习期间  奖惩情况 |  | | | | | | | | | | | | | | | |
| 工作经历栏 | | | | | | | | | | | | | | | | |
| 起止时间 | 工作单位 | | | | 岗位或职务 | | | | 薪酬 | | | | 证明人 | | | |
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| 工作期间  奖惩情况 |  | | | | | | | | | | | | | | | |
| 工作业绩 |  | | | | | | | | | | | | | | | |
| 社会关系栏（范围仅限父母、配偶、子女） | | | | | | | | | | | | | | | | |
| 与本人关系 | 姓 名 | | 工作单位 | | | | | 政治面貌 | | | | | | 现居住地 | | |
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| 已获取各类资格证书 | | | | | | | | | | | | | | | | |
| 证书名称 | | 获取时间 | | | | 发证单位 | | | | | 专业 | | | | | 职称等级 |
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| 特长爱好： | | | | | | | | | | | | | | | | |
| 原单位年收入情况：  应聘职位年收入期望值：  个人其他要求： | | | | | | | | | | | | | | | | |
| 本人承诺所填写的内容真实、完整、有效，并对所填内容承担责任  填表人： 时间: 年 月 日 | | | | | | | | | | | | | | | | |