附件3

磐安县卫计事业单位招聘考试报名表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 |  | 身份证号 |  |  |  | |  |  |  | |  |  |  |  |  | |  |  |  |  |  |  |  | 贴  一  寸  近  照 |
| 民 族 |  | 性 别 | | | |  | | | | 户　　籍 | | | | | |  | | | | | | | |
| 学 历 |  | 毕业时间 | | | |  | | | | 专业技术资格 | | | | | |  | | | | | | | |
| 毕业学校 |  | | | | | | | | | 所学专业 | | | | | |  | | | | | | | | |
| 现工作  单位 |  | | | | | | | | | 参加工作时间 | | | | | |  | | | | | | | | |
| 通讯地址 |  | | | | | | | | | 联系电话 | | | | | | 手机： | | | | | | | | |
| 固定电话： | | | | | | | | |
| 报考单位 |  | | | | | | | | | 报考职位 | | | | | |  | | | | | | | | |
| 学习  简历 |  | | | | | | | | | | | | | | | | | | | | | | | |
| 工作  简历 |  | | | | | | | | | | | | | | | | | | | | | | | |
| 招聘  单位  意见 |  | | | | | | | | | | | | | | | | | | | | | | | |