**2018年温州市龙湾区卫生计生系统**

**公开招聘工作人员报名表**

报考单位：                    报考的岗位：            岗位代码：

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 |  | | | 性  别 |  | 民  族 | | |  | | | | | | | | | 出生  年月 | | | |  | | | | | | | | | 照    片 |
| 籍贯 |  | | 现户口  所在地 |  | | 执业资格、技术资格、技术等级 | | | | | | | | | | | |  | | | | | | | | | | | | |
| 政治面貌 | |  | | 身份证  号码 | |  |  | | |  |  |  |  | | |  |  |  |  | |  |  |  |  |  |  |  | | |  |
| 全日制教育  学历、学位 | |  | | 学制    年 | | | | 毕业院校  及 专 业 | | | | | | |  | | | | | | | | | | | | | | | | |
| 在职教育  学历、学位 | |  | | 学制    年 | | | | 毕业院校  及 专 业 | | | | | | |  | | | | | | | | | | | | | | | | |
| 通讯地址 | |  | | | | | | | | | | | | | 联系电话  手  机 | | | | |  | | | | | | | | | | | |
| 个人简历： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 是否事业单位在编人员或定向委培生（如是，需用人单位及主管局意见） | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 用人单位意见：        负责人签字：                   年   月   日 | | | | | | | | | | | | | | 主管部门意见：        负责人签字：                   年   月   日 | | | | | | | | | | | | | | | | | |
| 本人声明：上述填写的内容真实完整。如有不实，本人愿意承担取消招聘资格的责任。                 申请人（签名）：                        年    月    日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | （贴照片处） | | | |
| 资格初审意见（工作人员填写） | | 签名：               年　　月　　日 | | | | | | | | | | | | | | | | | | | | | | | | | | （贴照片处） | | | |