九江学院第二附属医院应聘人员信息登记表

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| 姓名 | |  | | | 性别 |  | | | | 民族 | |  | 籍贯  (市+县区) |  | | 照片 | | |
| 出生年月  (6位数字) | |  | | | 健康情况 |  | | | | 婚姻情况 | |  | 政治  面貌 |  | |
| 现工作单位 | | |  | | | | | | | 现工作岗位 | | |  | | |
| 违法违纪情况 | | |  | | | | | | | 身份证号码 | | |  | | | | | |
| 联系电话 | | |  | | | | | | | QQ号 | | |  | | | | | |
| 报考岗位 | | |  | | | | | | | 现居住地址 | | |  | | | | | |
| 学习简历 | 学历 | | 专业 | | | | 是否  全日制 | | 学位 | 毕业学校 | | | | | 入学年份 | | 毕业年份 | 证明人 |
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| 工作经历 |  | | | | | | | | | | | | | | | | | |
| 科研 &  获奖情况 |  | | | | | | | | | | | | | | | | | |
| 家庭主要成员 | 关系 | | | 姓　名 | | | | 出生年月 | | | 政治面貌 | | 工作单位及职务 | | | | | |
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| 个人承诺 | 本人郑重承诺：认真履行应聘人员义务，诚实守信。本人所提供的个人信息、证件证明资料等相关材料真实、准确。对因提供有关不实信息或违反有关纪律规定所造成的后果，本人自愿承担相关法律责任。    应聘人员签名：  　　　　　　　　　 年    月    日 | | | | | | | | | | | | | | | | | |