附件

藤县督考办招聘编制外工作人员报名表

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **姓 名** |  | | **性 别** | |  | | | **出生年月** | |  | 张贴小二寸  彩色照片 | |
| **民 族** |  | | **籍 贯** | |  | | | **政治面貌** | |  |
| **入党**  **时间** |  | | **参加工**  **作时间** | |  | | | **健康状况** | |  |
| **现工作**  **单位** |  | | | | | | | | | |
| **家庭住址** |  | | | | | | | **身份证号码** | |  | | |
| **联系电话** |  | | | | | | | **邮 箱** | |  | | |
| **有何特长** |  | | | | | | | | | | | |
| **学 历**  **学 位** | **全日制**  **教 育** | |  | | | **毕业院校系及专业** | |  | | | | |
| **在 职**  **教 育** | |  | | | **毕业院校系及专业** | |  | | | | |
| **学习及工作经历（从初中起）** |  | | | | | | | | | | | |
| **家庭主要成员及重要社会关系** | **称谓** | **姓 名** | | **出生年月** | | | **政治面貌** | | **工作单位及职务** | | | **联系电话** |
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| **个人信息确认** | **本人确认以上所填报个人信息正确无误。如有虚假，本人愿承担由此产生的一切后果。**  **本人签名：**  **年 月 日** | | | | | | | | | | | |
| **备 注** |  | | | | | | | | | | | |