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| **上海市医疗器械检验研究院** | | | | | | | | | | | | | | | | | | | | | 照片 | | | |
| **公开招聘工作人员报名表** | | | | | | | | | | | | | | | | | | | | |
| 应聘岗位： | | | | | |  | | | | | | | |  | | | | | | |
| ***个***  ***人***  ***情***  ***况*** | 姓名： | | | | | | 性别： | | | | 出生年月： | | | | | | | | | 政治面貌： | | | | |
| 最高学历学位： | | | | | | | | | | | 毕业院校： | | | | | | | | | | | | |
| 健康状况： | | | | | | | | | | | 婚姻状况： | | | | | | | | | | | | |
| 身份证号码： | | | | | | | | | | | 居住证号码及有效期： | | | | | | | | | | | | |
| 户籍地址： | | | |  | | | | | | | | | | | | | | 邮编： | | | | | |
| 联系地址： | | | |  | | | | | | | | | | | | | | 邮编： | | | | | |
| 固定电话： | | | | | | | 移动电话： | | | | | | | | | 电子邮箱： | | | | | | | |
| ***家庭***  ***情况*** | 家庭关系 | | 姓名 | | | 政治面貌 | | | 工作单位 | | | | | | | | | | 担任何职 | | | | | 户籍所在地 |
|  | |  | | |  | | |  | | | | | | | | | |  | | | | |  |
|  | |  | | |  | | |  | | | | | | | | | |  | | | | |  |
| ***教***  ***育***  ***情***  ***况*** | 受教育阶段 | | | 起止年月 | | | | | | 是否全日制 | | | 学校(或培训机构) | | | | | | | | | | 专业(或培训内容) | |
| 高中 | | |  | | | | | |  | | |  | | | | | | | | | |  | |
| 大  学 | 大专 | |  | | | | | |  | | |  | | | | | | | | | |  | |
| 本科 | |  | | | | | |  | | |  | | | | | | | | | |  | |
| 硕士研究生 | | |  | | | | | |  | | |  | | | | | | | | | |  | |
| 博士研究生 | | |  | | | | | |  | | |  | | | | | | | | | |  | |
| 其他培训 | | |  | | | | | |  | | |  | | | | | | | | | |  | |
| ***工作***  ***经历*** | 单位名称 | | | | | | | 起止年月 | | | | | | | 担任职务 | | | 工作职责（或实习经历） | | | | | | |
|  | | | | | | |  | | | | | | |  | | |  | | | | | | |
|  | | | | | | |  | | | | | | |  | | |  | | | | | | |
| ***能***  ***力***  ***水***  ***平*** | 职称级别 | | | | | | | 计算机水平及证书 | | | | | | | | 外语水平及证书 | | | | | | 其他技能及证书 | | |
|  | | | | | | |  | | | | | | | |  | | | | | |  | | |

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| ***自***  ***我***  ***评***  ***价*** | （应聘者可根据应聘岗位要求进行自我评价） | |
| ***工***  ***作***  ***成***  ***果*** | （应聘者可根据自己的实际情况简述工作或实践中取得的成绩或者选择1、2件成功事件进行详细描述） | |
| ***补***  ***充***  ***说***  ***明*** | （应聘者可补充说明上面未提及但与应聘相关的其它问题） | |
| 本人承诺上述表格中所填写内容完全属实。  电子签名： 日期： | | |
| **备 注** | |  |
|
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注：身份证、居住证及有效期、大学本科及以上学历学位证书请附原件扫描件。