**武穴市公安局招聘警务辅助人员报名表**

报考职位                                      填报时间：     年    月   日

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| 姓名 |  | | | | 性别 | | | |  | | | | 民族 | | | |  | | | | | 近期1寸  免冠照片 | |
| 身份证号 |  | | | | | | | | 文化程度 | | | |  | | | | 学位 | |  | | |
| 毕业院校 |  | | | | | | | | | | | | 所学专业 | | | | |  | | | |
| 政治面貌 |  | | | 是否退役军人 | | | | □是/□否 | | | | | 婚姻状况 | | | | | □已/□未 | | | |
| 是否从事过警务辅助工作 | | | | □是/□否 | | | | | | 有何特长 | | | |  | | | | | | | | | |
| 家庭住址 |  | | | | | | | | | | | | | | | | | | | | | | |
| 户籍地  （填到村、居委、社区） | |  | | | | | | | | | | | | | 联系电话 | | | | | |  | | |
| 身高 |  | | | 体重 | | |  | | | | 视力 | | | | | 裸眼：左       右  矫正：左       右 | | | | | | | |
| 第一用人单位意向 |  | | | | | | 第二用人单位意向 | | | |  | | | | | | | | | 是否服从调配 | | |  |
| 何时何地受过何种奖惩 |  | | | | | | | | | | | | | | | | | | | | | | |
| 本人简历(从高中学历填起) | 年月—年月 | | | | | | 在何地何部门学习、工作 | | | | | | | | | | | | | | | | 证明人 |
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| 家庭成员及主要社会关系员简要情况 | 姓名 | | 称谓 | | | 身份证号码 | | | | | | 家庭住址及职业 | | | | | | | | | | | 政治  面貌 |
|  | | 父亲 | | |  | | | | | |  | | | | | | | | | | |  |
|  | | 母亲 | | |  | | | | | |  | | | | | | | | | | |  |
|  | | 祖父 | | |  | | | | | |  | | | | | | | | | | |  |

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|  |  | | 祖母 | | | |  | | | | | | |  | | | | | | | | | | | |  |
|  | | 外祖父 | | | |  | | | | | | |  | | | | | | | | | | | |  |
|  | | 外祖母 | | | |  | | | | | | |  | | | | | | | | | | | |  |
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| 家庭成员及主要社会关系，未婚的，主要指本人的父母(监护人、直接抚养人)、祖父母、外祖父母和年满16周岁兄弟姐妹；已婚的，还包括配偶和年满16周岁的子女。 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 相关情况说明 | 本人是否有较为严重的个人不良信用记录 | | | | | | | | | | | | | | | | | | | | | | | | □有/□无 | |
| 本人是否曾受过党纪、或政纪、或开除学籍处分 | | | | | | | | | | | | | | | | | | | | | | | | □有/□无 | |
| 本人是否曾被单位开除或者辞退 | | | | | | | | | | | | | | | | | | | | | | | | □有/□无 | |
| 本人是否曾在上虞公安分局辅警岗位工作且自动离职未满5年 | | | | | | | | | | | | | | | | | | | | | | | | □有/□无 | |
| 本人是否曾受过刑事处罚、或治安行政处罚、治安管理处罚 | | | | | | | | | | | | | | | | | | | | | | | | □有/□无 | |
| 本人是否曾参加过涉黑涉恶、黄赌毒违法犯罪团伙 | | | | | | | | | | | | | | | | | | | | | | | | □有/□无 | |
| 本人是否有吸毒史 | | | | | | | | | | | | | | | | | | | | | | | | □有/□无 | |
| 本人是否有精神病等过往病史 | | | | | | | | | | | | | | | | | | | | | | | | □有/□无 | |
| 本人或配偶是否已取得外国国籍、国（境）外永久居留权、长期居留许可 | | | | | | | | | | | | | | | | | | | | | | | | □有/□无 | |
| 本人或家庭成员、主要社会关系是否有非正常上访行为 | | | | | | | | | | | | | | | | | | | | | | | | □有/□无 | |
| 本人或家庭成员、主要社会关系是否有参加邪教等非法组织、非法活动，或从事其他危害国家安全活动的 | | | | | | | | | | | | | | | | | | | | | | | | □有/□无 | |
| 本人或家庭成员、主要社会关系否有涉嫌违法犯罪尚未查清的情形，或正在接受起诉等有可能被判处刑罚的情形 | | | | | | | | | | | | | | | | | | | | | | | | □有/□无 | |
| 家庭成员以及主要社会关系是否有被判处刑罚的 | | | | | | | | | | | | | | | | | | | | | | | | □有/□无 | |
| 本人承诺 | 本人填报的所有信息真实、有效，如有虚假信息和隐瞒真情的，造成的一切后果由本人自负。                          签名（捺印）： | | | | | | | | | | | | | | | | | | | | | | | | | |
| 资格审核意见（本栏由工作人员填写） | 身高测量结果 | | | | |  | | | | | | □合格/□不合格   体检医生签名： | | | | | | | | | | | | | | |
| 报考材料审核结果 | | | | | □合格 / □不合格      审核人签名： | | | | | | | | | | | | | | | | | | | | |
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填表说明：（1）资格审核意见一栏由工作人员填写，其他栏目的内容均有应聘人员填写。填写时，内容要真实、有效、完整。填写不完整的，不予报名。填写的信息虚假、错误，造成的一切后果自负。（2）表格采用A4纸，正反面打印。