**梧州市社会保险事业管理中心**

**招聘聘用制(编外)工作人员报名表**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **姓 名** | |  | | **性 别** | |  | **出生日期** | | |  | **相片**  **（近期1寸照）** | |
| **民 族** | |  | | **籍 贯** | |  | **出 生 地** | | |  |
| **政治面貌** | |  | | **婚姻状况** | |  | **健康状况** | | |  |
| **常住户口所在地** | |  | | | | | | | | |
| **身份证号码** | |  | | | | | **身高** | | |  | | |
| **学历学位** | |  | | | | | **毕业院校系**  **及专业** | | |  | | |
| **通讯地址** | |  | | | | | **联系电话** | | |  | | |
| **应聘岗位** | |  | | | | | **电子邮箱** | | |  | | |
| **主要学习经历** | | | | | | | | | | | | |
| **起止年月** | | | | | **学校及专业** | | | | | **学位** | | |
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| **主要工作经历** | | | | | | | | | | | | |
| **起止年月** | | | | | **单位** | | | | | **职务** | | |
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| **主要家庭成员及社会关系** | **称 谓** | | **姓 名** | | **工作单位及职务** | | | | | | | **备注** |
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| **本人承诺** | | | **本人已仔细阅读，所填资料完全真实。**  **签名： 日期： 年 月 日** | | | | | | | | | |
| **招聘单位资格初审** | | |  | | | | | **资格复审** |  | | | |