附件

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 2022年滨城区市立医院招聘紧缺专业技术人员报名登记表 | | | | | | | | | | | | | | | | | |
|  |  |  | | | | |  | | | |  | | | | | | NO： |
| 姓名 |  | | | | 性别 | |  | | | | 出生年月 | |  | | | | 照片 |
| 毕业院校、时间  及专业 |  | | | | | | | | | | 培养方式 | |  | | | |
| 学历及学制 |  | | | 学位 | | |  | | | | 政治面貌 | |  | | | |
| 户口所在地 |  | | | | | | | | | | | | | | | | |
| 家庭固定电话 |  | | | | | | | 手机 | | | |  | | | | | |
| 家庭住址 |  | | | | | | | | | | | | | | | | |
| 学习及工作简历 |  | | | | | | | | | | | | | | | | |
| 家庭成员及主要社会关系 | 称谓 | | 姓名 | | | 年龄 | | | 工 作 单 位 及 职 务 | | | | | | | | |
|  | |  | | |  | | |  | | | | | | | | |
|  | |  | | |  | | |  | | | | | | | | |
|  | |  | | |  | | |  | | | | | | | | |
|  | |  | | |  | | |  | | | | | | | | |
| 身份证号 |  | | | | | | | | | 执业证书编号 | | | | |  | | |
| 审核意见 |  | | | | | | | | | | | | | | | | |
| 备注 |  | | | | | | | | | | | | | | | | |
|  |  |  | | | | | 初审（签字）： | | | | | | |  | | 时间： | |