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| 附件2纳雍县中医医院2022年常年简化程序招聘编制外专业技术人员报名审批表**审核人：复核人：报名序号：**

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| **姓名** |  | **性别** |  | **民族** |  | **婚育状况** |  | **相片** |
| **政治****面貌** |  | **出生****年月** |  | **报考岗位** |  |
| **籍贯** |  | **出生地** |  | **家庭住址** |  |
| **学历****学位** |  | **毕业****时间** |  | **毕业院校及专业** |  |
| **职称** |  | **资格证书编号** |  | **执业证书编号** |  |
| **手机** |  | **QQ** |  | **微信** |  |
| **身份****证号** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **家庭成员及主要社会关系** | **称谓** | **姓名** | **年龄** | **政治面貌** | **工作单位及职务** |
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| **学习及工作简历** |  |
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| **报名信息确认** | **以上信息均为本人真实情况。如有虚假、遗漏、错误，责任由本人负责。****报名人员签字：****年　　月　　日** |
| **招聘领导小组审查意见** | **年　　月　　日** |

**说明：本表除“审核人”“复核人”“报名序号”“招聘领导小组意见”栏外，其余由报名人员填写。****1.“家庭成员及主要社会关系”栏只填写父母、配偶、子女；2.“学习及工作简历”栏从专业技术学历开始填起；3.持有执业资格证者需填写资格证书编号、执业证书编号。** |