附件2

成都市锦江区事业单位公开招聘卫生人才报名表

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **姓 名** | |  | | | **性 别** |  | **民 族** |  | **政治**  **面貌** | |  | **近期**  **免冠**  **1寸**  **照片** | |
| **身 高** | |  | | | **生源地** |  | **户口**  **所在地** |  | | | |
| **出 生**  **年 月** | |  | | | | **身份证**  **号码** |  | | | | |
| **毕业学校、专业及获得学位时间** | | | | **硕士** | |  | | | | | | |
| **博士** | |  | | | | | | |
| **是否属定向或委培** | | | |  | | | | **外语程度** | |  | | |
| **联系地址** | | |  | | | | | **固定电话** | |  | | |
| **电子邮箱** | | |  | | | | | **移动电话** | |  | | |
| **报考单位** | | |  | | | | | | | | | |
| **个人**  **简历**  **（请从高中填起）** |  | | | | | | | | | | | |
| **主要**  **家庭**  **成员**  **情况**  **（父母、配偶、子女、亲兄弟姐妹）** | **称 谓** | | | | **姓 名** | **年 龄** | | **工作单位及职务** | | | | |
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| **参加**  **学生会、**  **社团**  **活动、社会实践活动情况** |  | | | | | | | | | | | |
| **参与、主持课题情况** |  | | | | | | | | | | | |
| **发表**  **论文、专著情况** |  | | | | | | | | | | | |
| **本人声明：上述填写内容真实完整。如有不实，本人愿承担一切法律责任。**    **申请人（手写签名）： 年 月 日** | | | | | | | | | | | | |