应聘登记表

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| **应聘岗位** |  | | | | | | | | | | | | | | | | | 照片 | | | |
| 姓　　名 |  | | | | | 性　　别 | | |  | | | 出生日期 | |  | | | |
| 民　　族 |  | | | | | 婚姻状况 | | |  | | | 政治面貌 | |  | | | |
| 籍 贯 |  | | | | | 家庭住址 | | |  | | | | | | | | |
| 毕业院校 |  | | | | | 所学专业 | | |  | | | 身高 | |  | | | |
| 最高学历 |  | | | | | 特长爱好 | | |  | | | | | | | | |
| 身份证号 | | | | | |  | | | | | | | | 手　　机 | | | |  | | | |
| 紧急联系人/联系方式 | | | | | |  | | | | | | | | 电子邮箱 | | | |  | | | |
| 职称/资格等证书 | | | | | |  | | | | | | | | | | | | | | | |
| 社保/公积金情况 | | | | | | □从未参加过社会保险；  □已参加社会保险，社会保险关系现在区/县:  □没有公积金账户；  □有公积金账户,公积金账户现在区/县： | | | | | | | | | | | | | | | |
| 受教育情况（请从高中教育填起） | | | | | | | | | | | | | | | | | | | | | |
| **开始/结束时间** | | | | 院校名称 | | | | | | 所学专业 | | | 学历 | | | 学位 | | | | 是 否  全日制 | |
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| 培训经历 | | | | | | | | | | | | | | | | | | | | | |
| 时间 | | | | 培训机构名称 | | | | | | 培训内容 | | | | | | 取得证书 | | | | | |
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| 工作经历 | | | | | | | | | | | | | | | | | | | | | |
| 时间 | | | | 单位名称 | | | | | | 职位(薪资) | | | 工作内容 | | | | | | | 离职原因 | |
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| 家庭成员及重要社会关系 | | | | | | | | | | | | | | | | | | | | | |
| 称谓 | | 姓名 | | | 年龄 | | | 单位及职务 | | | | | | | | | 政治面貌 | | | | 备注 |
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| 您与公司内员工关系：□无亲属或朋友关系；  □有亲属或朋友关系，与 是 关系；  □与公司内员工只是认识，但无亲属或朋友关系。 | | | | | | | | | | | | | | | | | | | | | |
| **本人承诺：以上所填资料全部属实；如有虚假，本人自愿接受公司的辞退处理。**  签字： 日期 | | | | | | | | | | | | | | | | | | | | | |
| 应聘部门 | | |  | | | | 应聘职位 | | | |  | | | | 入职时间 | | | |  | | |
| 试用日期 | | |  | | | | 试用薪资 | | | |  | | | | 转正薪资 | | | |  | | |
| 部门意见： | | | | | | | | | | | 人力资源部意见： | | | | | | | | | | |
| 分管领导审核： | | | | | | | | | | | 主要领导审核： | | | | | | | | | | |

注：除本人承诺以下内容由工作人员填写外，其它内容均由应聘者填写。