**桂林市聋哑学校附属幼儿园听力言语康复教师**

**招聘报名登记表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 |  | | | | | | | | 性别 | | | | |  | | | | 民族 | | |  | | |  |
| 身份  证号 |  |  |  |  |  | |  |  | |  | |  |  | |  |  |  | |  |  |  |  |  |
| 毕业  院校 |  | | | | | | | | 学历  学位 | | | | |  | | | | 毕业  时间 | | |  | | |
| 所学  专业 |  | | | | | | | | 参加工  作时间 | | | | |  | | | | 职称 | | |  | | |
| 家庭  住址 |  | | | | | | | | | | | | | | | | | | | | | | |
| 现工作单位 |  | | | | | | | | | | | | | | | | | | | | | | | |
| 住宅  电话 |  | | | | | 移动电话 | | | | |  | | | | | | | 资格证  书号 | | |  | | | |
| 应聘  单位 | 桂林市聋哑学校附属幼儿园 | | | | | | | | | | | | | | | | | | | | | | | |
| 个人  简历 |  | | | | | | | | | | | | | | | | | | | | | | | |

备注：1.8月初（具体时间、地点另行通知）。联系电话：18277398118冯老师

2.面试时，受聘人员须携带《桂林市聋哑学校附属幼儿园听障康复教师招聘报名登记表》(贴本人近期小两寸正面免冠彩色白底照片)、本人有效身份证和符合报考职位招聘条件相关材料(如毕业证、学历证、身份证、教师资格证、普通话证及职称证其他获奖证书等)原件及复印件1份。