附件：

****人员登记表****

****应聘岗位：                       期望薪资：                    填写时间：    年  月  日****

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| 姓  名 | | |  | | | 性  别 | | | |  | | | | | 年  龄 | | | | |  | | | | | | | 照片 |
| 籍  贯 | | |  | | | 出生年月 | | | |  | | | | | 民  族 | | | | |  | | | | | | |
| 最高学历 | | |  | | | 专  业 | | | |  | | | | | 政治面貌 | | | | |  | | | | | | |
| 毕业院校 | | |  | | | | | | | | | | | | 身  高 | | | | |  | | | | | | |
| 身份证号 | | |  | | | | | | | | | | | | 体  重 | | | | |  | | | | | | |
| 现住址 | | |  | | | | | | | | | | | | 健康状况 | | | | | |  | | | | |  | |
| 户口所在地 | | |  | | | | | | | | | | | | 婚姻情况 | | | | | 未婚□      已婚□     离异□ | | | | | | | |
| 生育状况 | | | 已怀孕       月，  未育□；   已育：          个子女，年龄          岁 | | | | | | | | | | | | | | | | | | | | | | | | |
| 联系电话 | | |  | | 家庭电话 | | | |  | | | | 紧急联系人 | | | | | |  | | | | 电话 | | | |  |
| 有何资格证书 | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| 职  称 | | |  | | | | | | | | | | | 是否接受调剂 | | | | | | | | | |  | | | |
| 教育经历 | 起始时间 | | | 学校名称 | | | | | | | | 专业 | | | | | | | | | | 学历 | | | | | 教育类型 |
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| 培训经历 | 培训时间 | | | 培训名称 | | | | | | | | 培训课程 | | | | | | | | | | 培训方式 | | | | | 证书 |
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| 工作经历 | 起始时间 | | | 单位名称 | | | | | | | | 岗位 | | | | | | 薪资情况 | | | | 证明人/电话 | | | | | 离职原因 |
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| 直系亲属情况 | 姓  名 | | | 与本人关系 | | | | 工作单位 | | | | | | | | 岗位 | | | | | | 职务 | | | | | 联系电话 |
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| 爱好、特长 | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| 自我评价 |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ****本人保证以上所填内容全部属实无误，如有不实之处都将作为不予录取或解雇、辞退的理由，全部由本人承担。****  ****签字：**** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ****以下内容由用人单位填写：**** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 聘用部门 | |  | | | | | 聘用岗位 | | | |  | | | | | | 到岗时间 | | | | | | | |  | | |
| 部门主管、经理签字/日期 | | | | | | | 人力资源部签字/日期 | | | | | | | | | | 总经理签字/日期 | | | | | | | | | | |
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