附件：

应聘人员信息表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 | | |  | | 性别 | |  | | 出生  年月 | | | |  | | | 民族 | | |  | | |  | | |
| 政治  面貌 | | |  | | 健康状况 | |  | | | | | | 婚姻  状况 | | |  | | | | | |
| 最高  学历 | | |  | | 毕业院校 | |  | | | | | | 专业 | | |  | | | | | |
| 参加工作时间 | | | | |  | | | | | | | | 执业（职称）资格 | | | | | |  | | | | | |
| 应聘岗位 | | | | |  | | | | | | | | 身份证号码 | | | | | |  | | | | | |
| 户口所在地址 | | | | |  | | | | | | | | 现家庭住址 | | | | | |  | | | | | |
| 手机号码 | | | | |  | | | | | | | | 电子邮箱 | | | | | |  | | | | | |
| 紧急联系人姓名 | | | | |  | | | | | | | | 紧急联系人  电话 | | | | | |  | | | | | |
| **教育背景（从高中阶段填起，2个月以上的继续教育请填报）** | | | | | | | | | | | | | | | | | | | | | | | | |
| 起 | 止 | | | 学校或教育机构名称 | | | | | | 专业 | | | | 学历 | | | | | | 证明人 | | | | 联系  方式 |
|  |  | | |  | | | | | |  | | | |  | | | | | |  | | | |  |
|  |  | | |  | | | | | |  | | | |  | | | | | |  | | | |  |
|  |  | | |  | | | | | |  | | | |  | | | | | |  | | | |  |
|  |  | | |  | | | | | |  | | | |  | | | | | |  | | | |  |
| **主 要 工 作 经 历** | | | | | | | | | | | | | | | | | | | | | | | | |
| 起 | 止 | | | 工作单位 | | | | | | | 职位 | | | | 主要职责 | | | | | 直接  上级 | | | 联系  方式 | |
|  |  | | |  | | | | | | |  | | | |  | | | | |  | | |  | |
|  |  | | |  | | | | | | |  | | | |  | | | | |  | | |  | |
|  |  | | |  | | | | | | |  | | | |  | | | | |  | | |  | |
|  |  | | |  | | | | | | |  | | | |  | | | | |  | | |  | |
| **工作期间取得的主要业绩及获奖情况** | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | |
| 家庭主要成员 | | 姓名 | | | | 与本人关系 | | 年龄 | | | | 政治面貌 | | | | | 工作单位 | | | | | | | |
|  | | | |  | |  | | | |  | | | | |  | | | | | | | |
|  | | | |  | |  | | | |  | | | | |  | | | | | | | |
|  | | | |  | |  | | | |  | | | | |  | | | | | | | |
|  | | | |  | |  | | | |  | | | | |  | | | | | | | |
| 个人  声明 | 注：以上所有栏目均如实填写，若涉嫌提供虚假信息或履历造假，公司在任何时候均可解除劳动关系而无须承担任何责任或进行任何补偿。 | | | | | | | | | | | | | | | | | 本人  签字 | | |  | | | |