附件3

山东省药品不良反应监测中心公开招聘报名登记表

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| 姓名 |  | | 性别 |  | | | 民族 |  | | | | | 出生  年月 | |  | | | | | 1寸彩色照片 | | | | |
| 参加工作时间 |  | | 政治  面貌 |  | | | 籍贯 |  | | | | | 健康  状况 | |  | | | | |
| 婚姻  状况 |  | | 身份证号 | | | |  | | | | | | | | | | | | |
| 英语水平 |  | | 计算机水平 | | | | | | |  | | | | | | | | | | | | | | |
| 博士毕业论文题目 |  | | | | | | | | | | | | | | | 博士生导师 | | |  | | | | | |
| 硕士毕业论文题目 |  | | | | | | | | | | | | | | | 硕士生导师 | | |  | | | | | |
| 学  习  经  历 | 学历、学位 | | 起止时间 | | | 毕业院校 | | | | | | 所学专业 | | | | | 研究方向 | | | 学习形式 | | | | |
| 高中 | |  | | |  | | | | | | - | | | | | - | | |  | | | | |
| 专科 | |  | | |  | | | | | |  | | | | | - | | |  | | | | |
| 本科、学士 | |  | | |  | | | | | |  | | | | | - | | |  | | | | |
| 研究生、硕士 | |  | | |  | | | | | |  | | | | |  | | |  | | | | |
| 研究生、博士 | |  | | |  | | | | | |  | | | | |  | | |  | | | | |
| 教学科研经历 | （填写本人从事的科研情况及本硕博期间开设的课程） | | | | | | | | | | | | | | | | | | | | | | | |
| 工  作  简  历 | 起止时间 | | 工作单位 | | | | | | | | | | | | | | 工作内容及职务 | | | | | | | |
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| 获奖情况（不含科研成果获奖） | 奖项名称及等级 | | | | | | | 授予部门 | | | | | | | | | 授予时间 | | | | | 本人排名 | | |
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| 科研成果 | **已发表文章题目** | | | | | | | **发表刊物名称（注明卷、期、页）及时间** | | | | | | **作者位次（x/x）** | | | **级别或影响因子（SCI/ESCI/SSCI/CSSCI等）** | | | | | | **获奖情况** |
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| **已出版著作名称** | | | | | | | **出版社名称** | | | | | | **作者位次** | | | **出版时间** | | | | | | **获奖情况** |
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| **科研项目/课题名称** | | | **项目批准部门** | | | | | **项目**  **级别** | | **起止时间** | | | **经费** | | | | **位次** | | | **获奖情况** | | | |
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| **决策咨询成果名称** | | | **成果级别** | | | | | **成果时间** | | | | | **位次** | | | | | | **批示或证明** | | | | |
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| 家庭  成员  及其  主要  社会  关系 | 姓名 | 关系 | | 出生  年月 | 毕业学校、专业 | | | | | 学历学位 | | | | 政治面貌 | | | | | | 工作单位及职务 | | | | |
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| 通讯 | 联系电话 | |  | | | | | | | Email | | | |  | | | | | | | | | | |
| 地址及邮编 | |  | | | | | | | | | | | | | | | | | | | | | |
| 本人承诺：  本人郑重承诺本表所填内容属实，如有虚假，自动取消本人应聘山东省药品不良反应监测中心所有岗位的资格。  申请人签名（手写）：  年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | |

注：不得改动表格样式，可加页。