附件2：

**海西州残联机关临聘岗位报名表**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **姓名** |  | **性别** |  | **出生年月** |  | **年龄** |  | **照片** |
| **身份证号码** |  | **家庭住址** |  |
| **户籍地** |  | **联系电话** |  |
| **应聘岗位** |  |
| **初****审****意****见** |  | **复****审****意****见** |  |
| **本人确认签名：** |