附件

机关事业单位编外工作人员报名登记表

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **姓名** | |  | | **性别** |  | | **出生年月** | | |  | 2寸正面免冠近彩照 |
| **民族** | |  | | **婚姻**  **状况** |  | | **健康状况** | | |  |
| **政治**  **面貌** | |  | | **身份证**  **号码** |  | | | | | |
| **专业** | |  | | **毕业**  **时间** |  | | **身高**  **（厘米）** | |  | |
| **毕业学校** | |  | | | **户籍**  **所在地** | |  | | | | |
| **学历** | | **全日制**  **教 育** | |  | | **毕业学校、院系**  **及专业** | | |  | | |
| **在 职**  **教 育** | |  | | **毕业学校、院系**  **及专业** | | |  | | |
| **联系电话** | |  | | | | **E-mail** | |  | | | |
| **联系地址** | |  | | | | | | | | | |
| **有何特长** | |  | | | | | | | | | |
| **报名岗位** | |  | | | | | | | | | |
| **简历（从高中开始）** | **起止时间** | | | **学习工作单位** | | | **学校专业/工作单位职位** | | | | |
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| **奖惩情况** |  | | | | | | | | | | |
| **家庭情况** | **姓名** | | **关系** | **工作单位及职务或通讯地址** | | | | | | | |
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| **报名人承诺** | 本报名表所填内容正确无误，所提交信息真实有效。如有虚假，本人愿承担由此产生的一切后果。  报名人签名： | | | | | | | | | | |
| **资格审**  **查意见** |  | | | | | | | | | | |

注：1.本表一式一份；

2.若所填写单元格没有内容，请统一填写“无”；

3.家庭主要成员社会关系一栏如果无工作单位请填写通讯地址。