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| 附件2   |  |  |  |  |  | | --- | --- | --- | --- | --- | | 乌兰县公安局2025年面向社会公开招聘警务辅助人员资格审查表 | | | | | | 报考岗位： 填表时间： 年 月 日 | | | | | | 承诺书 | 本人参加乌兰县公安局2025年面向社会公开招聘警务辅助人员招聘，承诺提供的个人信息真实，如有不符，后果自负。 电费 本人（委托人）签字： | | | | | | | **考生基本信息（由考生如实填写）** | | | | | | | 姓名 |  | 民族 |  | 证件照 | | | 政治面貌 |  | 身份证号 |  | | 联系电话 |  | 毕业院校 |  | | 应届/往届 |  | 毕业时间 |  | | 现住址 |  | | | | **考生报考条件（由考生如实填写）** | | | **现场确认意见（由工作人员填写）** | | | | 户籍 |  | | 审核意见（符合\不符合） |  | | | 出生日期 |  | | 审核意见（符合\不符合） |  | | | 学历 |  | | 审核意见（符合\不符合） |  | | | 专业名称 |  | | 审核意见（符合\不符合） |  | | | 其他证书 |  | | 审核意见（符合\不符合） |  | | | 是否本人现场资审 | 审核意见（是\否） | | |  | | | 证明材料是否齐全 | 审核意见（是\否） | | |  | | | 现场资格初审意见 | 资审人员签字： 大道发生大法师打发斯蒂芬 年 年 | | | | | | 考生签字确认资格初审意见 | 考生(委托人）确认签字： 大道发生大法师打发斯蒂芬 年 年   年 月 日 | | | | | | 注意事项：1、此表在现场确认考生资格时使用；2、考生填写内容必须由考生本人如实填写，别人代写或本人填写虚假信息由考生自己承担责任。3、审查人员在现场确认意见项填写“符合”或“不符合”，“是”或“否”，在现场资格初审意见项填写“资格初审符合条件”或“资格初审不符合条件”，也可用“√”“×”等其他符号代替。4、审查人员填写完现场资格初审意见并签字后，交考生签字确认； | | | | | | |