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| **合肥市地方病防治所公开招聘政府购买服务岗位人员应聘报名表**  填表日期： | | | | | | | | | | | | | | | | | |
| **姓名** |  | | **性别** | |  | | | | **出生**  **日期** | |  | | | | **照片**  **（证件照）** | | |
| **民族** |  | | **籍贯** | |  | | | | **政治**  **面貌** | |  | | | |
| **参加工作时间** |  | | **户口**  **所在地** | |  | | | | **入党团时间** | |  | | | |
| **身份**  **证号** |  | | | | | | | | **职称/证书** | |  | | | | | | |
| **家庭**  **住址** |  | | | | | | | | | | | | | | | | |
| **教育**  **经历**  **（高中起，由近到远）** | **起止年月** | | **学历** | | **学校** | | | | | | | | **专业** | | | | **学习形式** |
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| **工作**  **经历（由近到远）** | **起止年月** | | **所在单位** | | | | **岗位** | **公司**  **性质** | | **月均收入** | | **证明人** | **联系方式** | | | | **离职原因** |
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| **奖惩**  **情况** |  | | | | | | | | | | | | | | | | |
| **家庭 主要 成员 情况**  **（父母/配偶/子女）** | **关系** | **姓名** | | **年龄** | | **政治面貌** | | | **工作单位** | | | | | | | **职务** | |
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| **联系**  **方式** | **手机** | | |  | | | | | | | | | | | | | |
| **Email** | | |  | | | | | | | | | | | | | |
| **最快**  **到岗**  **时间** | **年 月 日** | | | | | | | | **薪资期望**  **（税前月均综合收入）** | | | | |  | | | |
| **填表**  **说明** | **1、表格内均为必填项，没有请填无；**  **2、请确认以上内容有效属实，并许可公司对所填写内容进行合法的背景调查，如以上内容有弄虚作假的成分，本人愿意为此承担相应后果。**    **填表人：**    **年 月 日** | | | | | | | | | | | | | | | | |