附件2：

泰州市姜堰区2018年公开招聘医疗卫生单位工作人员报名表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **报考单位：**  **岗位名称：**   报名序号： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 姓 名 | |  | | | | | | | | | | | 性别 | | | | |  | | | | | | | 民族 | | | | | | |  | | | | 籍贯 | |  | | 相  片 | | |
| 出生年月 | |  | | | | | | | | | | | 政治面貌 | | | | | | | | |  | | | | | | | | | | | | | 婚姻状况 | |  | | |
| 毕业院校及专业 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 毕业时间 | |  | | |
| 学历 |  | | | | | | | | | | | | | | | | | | 学位 | | | | | | |  | | | | | | | | | | | | | |
| 工作单位 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 是否事业编内人员 | |  | | |
| 执业资格（职称） | | | | |  | | | | | | | | | 参加工作时间 | | | | | | | | | |  | | | | | | | | | | | 工作年限 | |  | | |
| 通讯地址 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 邮政编码 | | | | |  |
| 身份证号 | | | | |  |  |  | |  |  |  |  | | |  |  |  | | |  |  | |  |  | | |  | |  | |  | |  | 联系电话 | | |  | | | | | |
| 掌握何种外语及程度 | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | 计算机掌握程度 | | | | |  | | | |
| 学习和工作经历 | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 主要奖惩情况 | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 家庭成员情况 | | | | | | | | 姓 名 | | | | | | | | | 关 系 | | | | | | | | | | | | | 所在单位 | | | | | | | | | | | 职 务 | |
|  | | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | |  | |
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| 承 诺 书 | | | | | | | | 本人提供的上述信息均真实有效，符合招聘简章规定的报考条件和岗位要求，并符合回避制度要求。如有不实，由此造成的一切后果自负。若被聘用，单位可随时解除与本人的聘用关系。  承诺人: 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 卫生计生部门初审意见 | | | 审核人：  年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | 人社部门  复审意见 | | | | | | | | 审核人：  年 月 日 | | | | | | |
| 备 注 | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

填表说明：

1．请填表人实事求是地填写，以免影响聘用；

2．报考单位填写具体报考的单位名称（不要填主管部门），如未设置岗位代码，则填写岗位名称；

3．姓名、性别、民族、籍贯、出生年月必填，非全日制高校毕业生“执业资格（职称）”必填；

4．毕业院校及专业、毕业时间、学历必填，填写符合所报岗位条件的学历、专业；

5．工作单位：没有工作单位的填“无”；只要有工作单位就必须提供单位同意报考证明。

根据公告要求，报名时不能提供单位同意报考证明的人员，必须在“备注栏”作出承诺“本人将在体检前提供单位同意报考证明，如届时不能提供，自愿放弃体检资格”，并签名。

6．工作年限：所报考岗位有工作经历条件的人员必填；

7．通讯地址必填；

8．身份证号必填，靠左填写；

9．联系电话必填，包括手机和住宅电话；

10．学习和工作经历必填，从高中起填写；

11．家庭成员情况尽可能填写完整。