**附件1：**

**嘉兴市南湖区卫生健康局招聘编外用工报名表**

报名序号(由工作人员填写)： **本表一式一份**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 |  | | 身份证号 |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |  |  |
| 民 族 |  | | 性 别 |  | | | | | 政治面貌 | | | | |  | | | | | 贴  一  寸  彩  照 | | | | |
| 学 历 |  | | 婚姻状况 |  | | | | | 户籍性质 | | | | |  | | | | |
| 所学专业 |  | | 参加工作  时 间 |  | | | | | 职 称 | | | | |  | | | | |
| 毕业院校及时间 |  | | | | | | | | 出生年月 | | | | |  | | | | | | | | | |
| 现户籍所在地 | 县（市） 镇(区) 村(社区) | | | | | | | | 联系方式 | | | | |  | | | | | | | | | |
| 现工作单位 |  | | | | | | | | Email | | | | |  | | | | | | | | | |
| 执业资格证书名称及取得时间 | |  | | | | | | | | | | | | | | | | | | | | | |
| 工作简历、  学习简历（  从初中填起）、奖惩情况 |  | | | | | | | | | | | | | | | | | | | | | | |
| 初审  意见 | 签名或盖章  年 月 日 | | | 复审  意见 | | | | | 签名或盖章  年 月 日 | | | | | | | | | | 贴  一  寸  彩  照 | | | | |

本人签字：