附件：

长江师范学院招聘专业技术人员报名表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 报考岗位 | 校医院医务人员 | | | | | | | | | | | | | | | | | 1寸登记照 |
| 姓名 |  | | | | 性别 |  | | | | | 民族 | | |  | | | |
| 籍贯 |  | | | | 年龄 |  | | | | | 出生年月 | | |  | | | |
| 政治面貌 |  | | | | 职称 |  | | | | 婚姻状况 | | | | |  | | |
| 身份证号码 |  | | | | | | | | | | | | | | | | |
| 学历学位 | | 毕业院校 | | | | | | | | | | 专业 | | | | | | 毕业时间 |
|  | |  | | | | | | | | | |  | | | | | |  |
|  | |  | | | | | | | | | |  | | | | | |  |
| 执业资格类别 | |  | | | | | 执业资格范围 | | | | | | | | |  | | |
| 外语语种及水平 | | |  | | | | | | 计算机水平 | | | | | | | |  | |
| 现工作单位及职务 | | | |  | | | | | | | | | | | | | | |
| 通讯地址 | | | |  | | | | | | | | | | | | | | |
| 联系电话 |  | | | | | | | 邮箱地址 | | | | |  | | | | | |
| 学习及工作经历(从高中入学起填) |  | | | | | | | | | | | | | | | | | |
| 自我评价 |  | | | | | | | | | | | | | | | | | |
| 填写信息  属实承诺 | 本人承诺，符合本次报考条件及职位资格条件，本表所填写信息真实准确，若弄虚作假立即取消考试或聘用资格。  填表人签名： 年 月 日 | | | | | | | | | | | | | | | | | |
| 资格审查  结果 | 是否符合报考条件：  审查人签字： 年 月 日 | | | | | | | | | | | | | | | | | |