**铜陵市妇幼保健院招聘报名表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 |  | | | | | | 性 别 | | | | | | |  | | | | | 照片 | | | |
| 民 族 |  | | | | | | 籍 贯 | | | | | | |  | | | | |
| 出生年月 |  | | | | | | 政治面貌 | | | | | | |  | | | | |
| 英语水平 |  | | | | | | 计算机水平 | | | | | | |  | | | | | | | | |
| 手机号码 |  | | | | | | 电子邮箱 | | | | | | |  | | | | | | | | |
| 报考专业 |  | | | | | | | | | | | | | | | | | | | | | |
| 学历（学位） |  | | | | | | | | | | | | | | | | | | | | | |
| 毕业院校及专业 |  | | | | | | | | | | | | | | | | | | | | | |
| 执业资格证名称及取得时间 | | | | | |  | | | | | | | | | | | | | | | | |
| 身份证号码 |  |  |  |  |  | | |  |  |  |  |  |  | |  |  |  |  | |  |  |  |
| 家庭住址 |  | | | | | | | | | | | | | | | | | | | | | |
| 学习（自高中起）、实习和工作经历 |  | | | | | | | | | | | | | | | | | | | | | |
| 奖惩情况 |  | | | | | | | | | | | | | | | | | | | | | |
| 诚信承诺 | 本人上述所填写的个人信息以及提供的相关证件、材料均真实、有效。若有虚假，责任自负。    本人签名：  年 月 日 | | | | | | | | | | | | | | | | | | | | | |