附件1

**丹江口市面向“三支一扶”人员**

**考核聘用事业单位工作人员报名表**

原服务单位：

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 姓  名 |  | | | | | 性别 | |  | | | | | | | 民族 | | | |  | | | | | | 近期小二寸  照片 | | | | | |
| 出生年月 |  | | | | | 籍贯 | |  | | | | | | | 政治面貌 | | | |  | | | | | |
| 现户籍所在地 |  | | | | | | | | | | | | | | 婚姻状况 | | | |  | | | | | |
| 人事档案  保管单位 |  | | | | | | | | | | | | | | | | | | | | | | | |
| 学历  （学位） | | | | | | | 毕业院校  及毕业时间 | | | | |  | | | | | | | | | | | | | | | | | | |
| 所学专业及取得的学位 | | | | |  | | | | | | | | | | | | | | | | | | |
| 身份证号 |  |  | |  |  | |  | |  |  | | |  |  | |  | |  | |  | |  | |  | |  | |  |  |  | |
| 原工作单位及职务 |  | | | | | | | | | | | | | | | | 单位  性质 | | | |  | | | | | | | | | |
| 联系方式 | 通信  地址 | | 邮编： | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 电子  邮件 | |  | | | | | | | | 手机  号码1 | | | |  | | | | | | | | 手机号码2 | | | |  | | | |
| 职称、职业资格证书、专业证书 |  | | | | | | | | | | | | | | 取得  时间 | | |  | | | | | | | | | | | | |
| 报考人员  签 名 | 本人确认自己符合拟报考岗位所需的资格条件，无公告规定的不属于考核聘用范围的情形，所提供的材料真实、有效，如经审查不符，承诺自动放弃考试和聘用资格。  报名人签字：  年 月 日 | | | | | | | | | | | | | | 资格  审查  意见 | | | 审查人签字:  审核日期： 年 月 日 | | | | | | | | | | | | |

填表说明：请仔细阅读，认真填写，避免涂改。