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| **姓名** |  | **身份证号** |  |  |  |
| **民族** |  | **性别** |  |  |
| **政治面貌** |  | **出生日期** |  |  |
| **毕业院校** |  | **毕业时间** |  |  |
| **所学专业** |  | **学历** |  | **学位** |  |  |
| **工作单位** |  | **参加工作时间** |  |  |
| **单位性质** |  | **现聘岗位** |  |  |
| **户口所在地（应届毕业生生源地）** |  | **联系电话** |  |  |
| **现有执业证** |  |  |
| **现有专业技术 资格证** |  |  |
| **报考单位** |  | **报考职位** |  |  |
| **个人简历(从高中阶段填起，须注明每段经历的起止年月、所在学校或单位及任职情况)** |  |  |
| **备注** |  |  |
| 本人郑重承诺：此表我已完整填写，所填个人信息均属实，如信息填写不完整或有不实之处，出现所有后果由本人承担。本人签名：年 月 日 |  |

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2020年崂山区卫生健康局公开选聘骨干

卫生专业技术人才报名登记表