附件2

达州中医药职业学院工作人员应聘登记表

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 |  | | | | | 性别 |  | | | 民族 | |  | | 出生  年月 |  | | 近期  免冠  照片 |
| 政治  面貌 |  | | | | | 籍贯 |  | | | 所学专业 | |  | | 特长  爱好 |  | |
| 婚姻状况 |  | | | | | 应聘岗位编号 | |  | | | | | | 本人联系电话 |  | |
| 现工作  单 位 | | | |  | | | | | | | | | | 单位  性质 |  | |
| 家庭详细地址 | | | | | |  | | | | | | | | 长期居住地址 |  | | |
| 个人  简历 | |  | | | | | | | | | | | | | | | |
| 取得荣誉  及奖励 | |  | | | | | | | | | | | | | | | |
| 家庭成员及主要社会关 系 | | | 姓 名 | | | 与本人  关 系 | | | 年龄 | | 政治  面貌 | | 单位及职务 | | | | |
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| 资格  初审 | | |  | | | | | | 资格  复审 | | | |  | | | | |
| 面谈考核成绩 | | |  | | | 名次 | | |  | | | | 体检情况  （是否合格） | | |  | |
| 学院  聘用  意见 | | | 组 织  人 事  部意见 | |  | | | | | | | | | | | | |
| 分管领导意见 | |  | | | | | | | | | | | | |
| 主要领导意见 | |  | | | | | | | | | | | | |

达州中医药职业学院组织人事部 制