附件

通江县动物防疫专员特聘计划报名表

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **姓 名** | |  | | **性 别** |  | | **年 龄** |  | | 张贴彩色  一寸免冠照片 |
| **文化程度** | |  | | **政治面貌** |  | | **职称或特长** |  | |
| **身 高** | |  | | **体 重** |  | | **联系电话** |  | |
| **民 族** | |  | | **婚 姻** |  | | **QQ** |  | |
| **籍 贯** | |  | | **现居住地** |  | | | | |
| **应聘职位** | |  | | | | **身份证号码** | | |  | |
| **教育背景** | | |  | | | | | | | |
| **工作经历及职位描述** | |  | | | | | | | | |
| **自我评价** |  | | | | | | | | | |
| **奖惩情况** |  | | | | | | | | | |
| **其它要求** |  | | | | | | | | | |