州应急指挥中心公益性岗位人员应聘登记表

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| 个 人 信 息 | | | | | | | | | | | | | | |
| 姓 名 | |  | | | 性别 |  | | 出生日期 | | |  | | 近期免冠  一寸照片 | |
| 身份证号 | |  | | | | | | 政治面貌 | | |  | |
| 民 族 | |  | | | 学历 |  | | 学 位 | | |  | |
| 毕业院校 | |  | | | | | | 专　　业 | | |  | |
| 资格证书 | |  | | | | | | 电子邮箱 | | |  | |
| 联系地址 | |  | | | | | | 联系手机 | | |  | | 婚否 |  |
| 教　育　经　历（请从高中/中专起填写） | | | | | | | | | | | | | | |
| 起止时间 | | | 毕业院校/专业 | | | | | | | 获得学位 | | 全日制 / 非全日制 | | |
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| 从　业　经　历 | | | | | | | | | | | | | | |
| 起止时间 | | | 工作单位或实习经历 | | | | | | | | | 职务岗位 | | |
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| 家  庭  主  要  关 系 | | | | | | | | | | | | | | |
| 称谓 | 姓名 | | | 出生年月 | | | 政治面貌 | | 工作单位及职务 | | | | | |
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本人承诺以上所填信息属实。