**湖南百舸水利建设股份有限公司应聘报名表**

应聘岗位： 填表日期： 年 月 日

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| 姓 名 | |  | | | 性 别 | |  | | 籍 贯 | | |  | | | 相片 | | | | |
| 民 族 | |  | | | 政治面貌 | |  | | 户口类型 | | |  | | |
| 出生年月 | | 年 月 日（ 阳历  阴历） | | | | | | | 身 高 | | | CM | | |
| 婚姻状况 | |  | | | 健康状况 | |  | | 体 重 | | | KG | | |
| 第一学历 | |  | | | 专 业 | |  | | 毕业学校 | | |  | | | 学制形式 | | | |  |
| 最高学历 | |  | | | 专 业 | |  | | 毕业学校 | | |  | | | 学制形式 | | | |  |
| 职 称 | |  | | | | | | | 职业资格证 | | |  | | | | | | | |
| 身份证号码 | |  | | | | | | | 邮箱号码 | | |  | | | | | | | |
| 户籍地址 | |  | | | | | | | 现居住地址 | | |  | | | | | | | |
| 联系方式  （手机） | |  | | | 紧急联络人 | |  | | 紧急联络人关系及电话 | | |  | | | | | | | |
| 应聘来源 | | □网站 □媒体 □人才市场  □学校 □其它 □他人推荐 | | | | | | | 推荐人姓名及电话 | | |  | | | | | | | |
| **一、教育经历**（从高中开始写起） | | | | | | | | | | | | | | | | | | | |
| 起止年月 | | 学校名称 | | | | | | 专 业 | | | | | | 学 历 | | | | 学制形式 | |
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| **二、工作经历**(请以第一份工作开始填写) | | | | | | | | | | | | | | | | | | | |
| 起止年月 | | 单位名称 | | | | | | 岗位、职务 | | 薪酬待遇 | | | | 证明人及电话 | | | | | |
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| 1. **培训经历（含资格、职称证书）** | | | | | | | | | | | | | | | | | | | |
| 培起止年月 | | 培训课程培训机构 | | | | | | 培训课程 | | | | | | 所获证书 | | | | | |
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| **四、**自我评价（大于100字）： | | | | | | | | | | | | | | | | | | | |
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| **五、家庭主要成员及社会关系：** | | | | | | | | | | | | | | | | | | | |
| 称谓 | 姓名 | | 年龄 | 文化程度 | | 工作单位（地点） | | | | | | | 职务 | | | 电话 | | | |
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| **六、奖惩情况：** | | | | | | | | | | | | | | | | | | | |
| NO: | 时间 | | | 奖惩事由 | | | | | | | 所获证书 | | | | | | 备注 | | |
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| **六、健康状况：（近一年内县级及以上医院体检情况）** | | | | | | | | | | | | | | | | | | | |
| 1、是否有心脏病 | | | |  | | | | | | | 2、是否有高血压 | | | | | |  | | |
| 3、其它病史（详细注明） | | | |  | | | | | | | | | | | | | | | |
| 您期望的薪酬范围年薪收入：  其它要求： | | | | | | | | | | | | | | | | | | | |
| **本人承诺**  以上信息完全真实可靠，如发现虚假信息，由此造成的一切后果均由本人负责，并承担相应的责任。  本人签名： 日期： 年 月 日 | | | | | | | | | | | | | | | | | | | |