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| 附件1 | |  | |  | |  | | |  | |  |  | | |  |  | |  |
| 2021年江苏省响水县人民医院赴齐齐哈尔医学院校园招聘岗位表 | | | | | | | | | | | | | | | | | |
| **招聘单位** | | **经费渠道** | | **岗位代码** | | **招聘岗位** | | **招聘人数** | **学历** | | **专业** | | | **其他条件** | **招聘对象** | | | **考试方式** |
| 响水县人民医院 | | 差拨 | | A01 | | 临床科室 | | 16 | 本科及以上学历 | | 临床医学 | | | 取得相应学位 | 2021年毕业生 | | | 笔试＋面试 |
| A02 | | 临床科室 | | 4 | 临床医学 | | | 不限 | | |
| A03 | | 医学影像科 | | 2 | 医学影像、医学影像学 | | | 2021年毕业生 | | |
| A04 | | 医学影像科 | | 1 | 医学影像、医学影像学 | | | 不限 | | |
| A05 | | 医学影像科 | | 2 | 医学影像技术 | | | 2021年毕业生 | | |
| A06 | | 医学影像科 | | 1 | 医学影像技术 | | | 不限 | | |
| A07 | | 检验科 | | 3 | 医学检验、医学检验技术 | | | 2021年毕业生 | | |
| A08 | | 病理科 | | 1 | 临床医学（病理学方向） | | | 不限 | | |
| A09 | | 口腔科 | | 1 | 口腔医学 | | | 2021年毕业生 | | |
| A10 | | 药学部 | | 2 |  | | 药学、临床药学 | | |  | 不限 | | |
| 总计 | | | | 33 | | | | | | | | | | | | | | |

附件2

**响水县卫健系统事业单位校园招聘工作人员报名表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 姓名 |  | 性别 |  | | 身份证号 | | |  | |  |  |  |  |  |  | |  |  |  |  | | |  |  | |  |  |  |  |  |
| 籍贯 |  | 最高学历 | |  | | | 最高学位名称 | | | | | |  | | | | | | | | | 贴照片处  （另一张点贴于  本表右下角） | | | | | | | | |
| 毕业院校 |  | | | | | | 毕业时间 | | | | | |  | | | | | | | | |
| 本科专业 |  | | | | | | 研究生专业 | | | | | |  | | | | | | | | |
| 掌握外语  及程度 |  | | | | | | 计算机掌握程度 | | | | | |  | | | | | | | | |
| 专业技术  职务 |  | | | | | | 已考取有关资格 | | | | | |  | | | | | | | | | | | | | | | | | |
| 政治面貌 |  | | | 婚否 | | |  | | 报考岗位 | | | | | | |  | | | | | | | | | | | | | | |
| 通讯地址 |  | | | | | | | | | | | | | | | 邮政编码 | | | | | | | | |  | | | | | |
| 联系电话 |  | | | | |  | | | | | | | | | | 户籍所在地 | | | | | | | | |  | | | | | |
| 现工作单位及职务 |  | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | |
| 简历  （自高中起，时间到月） |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 工作或  社会实践  经历 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 奖惩  情况 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 主要科研  成果  （论文、著作等） |  | | | | | | | | | | | | | | | | | | | | 照片2 | | | | | | | | | |
| 回避关系 |  | | | | | | | | | | | | | | | | | | | |
| 其他须  说明事项  或要求 |  | | | | | | | | | | | | | | | | | | | |

**注意**：本表中所填内容以及所提供材料均真实有效，如有不实之处，取消录用资格。