附件2：

**2021年响水县市场监督管理局政府购买服务岗位工作人员公开招聘报名表**

**报名序号：**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 | |  | | 身份  证号 |  |  |  |  |  |  |  |  | | |  |  |  |  |  | |  |  |  |  |  | 照 片 |
| 性别 | |  | | 出生年月 |  | | | | 户籍 | | | | |  | | | 政治  面貌 | | | |  | | | | |
| 何时毕业何校 | | |  | | | | | | | | | | | 学历 | | | | | |  | | | | | |
| 专业 | |  | | | | | | | | | | | 学 位 | | | | | | |  | | | | | | |
| 联系  地址 | |  | | | | | | | | | | | 联系电话 | | | | | | |  | | | | | | |
| 参加工作时间 | | |  | | | | | | | | | | 健康状况 | | | | | | |  | | | | | | |
| 现工作单位 | | |  | | | | | | | | | | 职 称 | | | | | | |  | | | | | | |
| 个人  简历  (从高  中起) |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| 报考人员承诺签 名 | 本人已仔细阅读招聘公告、岗位、专业等相关资料，承诺所填写的个人信息和所提供的资料真实准确，并符合招聘岗位的要求。如果由于填写个人信息或提供资料不准确、不真实而导致不能正常参加笔试、面试或取消聘用资格等情况，由本人承担全部责任。  承诺人签字： 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 审核  意见 | 审核人(签名)： 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 备注 |  | | | | | | | | | | | | | | | | | | | | | | | | | |