|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **2021年下半年公开招聘报名表（广建德公司）** | | | | | | | | | | | | | | | |
| 姓 名 | |  | | | 性 别 | |  | | | 民 族 |  | | | 照片 | |
| 出生年月 | |  | | | 籍 贯 | |  | | | 户籍所在地 |  | | |
| 参加工作时间 | |  | | | 政治面貌 | |  | | | 健康状况 |  | | |
| 学 历 | |  | | | 职 称 | |  | | | 婚姻状况 |  | | |
| 身份证号码 | |  | | | | | | | | 联系手机 |  | | | | |
| 家庭住址 | |  | | | | | | | | | | | | | |
| 现工作单位及部门 | | |  | | | | | | | | | 现职务/岗位 |  | | |
| 应聘企业 | | |  | | | | | | | | | | | | |
| 应聘岗位 | | |  | | | | | | | | | | | | |
| **教 育 背 景（请从高中毕业后填起）** | | | | | | | | | | | | | | | |
| 起止年月 | | | 毕业院校 | | | | | 所学专业 | | | | 学历学位 | 培养方式  （全日制/在职） | | |
|  | | |  | | | | |  | | | |  |  | | |
|  | | |  | | | | |  | | | |  |  | | |
|  | | |  | | | | |  | | | |  |  | | |
|  | | |  | | | | |  | | | |  |  | | |
|  | | |  | | | | |  | | | |  |  | | |
| **工 作 经 历** | | | | | | | | | | | | | | | |
| 起止年月 | | | 单位名称 | | | | | | | | | 部 门 | 职务/岗位 | | |
|  | | |  | | | | | | | | |  |  | | |
|  | | |  | | | | | | | | |  |  | | |
|  | | |  | | | | | | | | |  |  | | |
|  | | |  | | | | | | | | |  |  | | |
|  | | |  | | | | | | | | |  |  | | |
|  | | |  | | | | | | | | |  |  | | |
|  | | |  | | | | | | | | |  |  | | |
| **家庭主要成员及重要社会关系** | | | | | | | | | | | | | | |
| 称 谓 | | 姓 名 | | | 出生年月 | | 政 治 面 貌 | | | 工 作 单 位 及 职 务 | | | | | |
|  | |  | | |  | |  | | |  | | | | | |
|  | |  | | |  | |  | | |  | | | | | |
|  | |  | | |  | |  | | |  | | | | | |
|  | |  | | |  | |  | | |  | | | | | |
|  | |  | | |  | |  | | |  | | | | | |
|  | |  | | |  | |  | | |  | | | | | |
|  | |  | | |  | |  | | |  | | | | | |
|  | |  | | |  | |  | | |  | | | | | |
|  | |  | | |  | |  | | |  | | | | | |
|  | |  | | |  | |  | | |  | | | | | |
|  | |  | | |  | |  | | |  | | | | | |
|  | |  | | |  | |  | | |  | | | | | |
| **有何特长或取得何种表彰** | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| **自我评价** | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| 本人保证上述表格中所填内容完全真实、准确，如有虚假愿承担一切责任。  本人签名： 日期： | | | | | | | | | | | | | | |