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| 姓 名 | | |  | | 性 别 | | |  | | | 出生年月 | |  | | 籍 贯 | | | |  | 照  片 |
| 民 族 | | |  | | 身 高 | | |  | | | 体 重 | |  | | 婚 否 | | | |  |
| 政治面貌 | | |  | | 健康状况 | | |  | | | 从业年限 | |  | | 薪资要求 | | | |  |
| 学 历 | | |  | | 专 业 | | |  | | | | | 毕业院校 | |  | | | | |
| 能否出差 | | 能 □ 否 □ | | | | | 能否加班 | | 能 □ 否 □ | | | | | 能否接受工作调动 | | 能 □ 否 □ | | | | |
| 身份证号码 | | | |  | | | | | | | | | | | | | | | | |
| 家庭住址 | | | |  | | | | | | | | 联系方式 | | | | | |  | | |
| 教育  背景 | 起止日期 | | | | | 学 校 | | | | | | 专 业 | | | | | | | | |
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| 工作  经历 | 起止日期 | | | | | 工作单位 | | | | | | 职务及主要工作职责 | | | | | 证明人及联系方式 | | | |
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| 家庭  成员 | 姓 名 | | | | | 与本人关系 | | | | | | 身份证号 | | | | | 联系方式 | | | |
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| 自我 评价 |  | | | | | | | | | | | | | | | | | | | |
| 填表人声 明 | 1. 本人保证所填写资料属实。 2. 保证遵守招聘方案全部要求。 3. 若有不实之处，本人愿意无条件接受处罚直至辞退，不要求任何补偿。   声明人： | | | | | | | | | | | | | | | | | | | |
| 期望  薪资 |  | | | | | | | | | 期待其他福利 | |  | | | | | | | | |
| 面试  评价 |  | | | | | | | | | | | | | | | | | | | |

附件1：

**报名登记表**