附件2：

**深圳市龙岗区人民医院公开选聘职员报名表**

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| 姓 名 | |  | 性别 | | |  | | | 民族 | | | |  | | 贴相片处 | | | |
| 出生年月 | |  | 籍贯 | | |  | | | | | | | | |
| 政治面貌 | |  | 婚姻状况 | | |  | | | | | | | | |
| 学 历 | |  | 学位 | | |  | | | | | | | | |
| 毕业院校 | |  | | | | 所学专业 | | | |  | | | | | 外语等级 | | |  |
| 专业技术职称  （写清执业范围） | |  | | | 现从事专业（岗位） | | | | | | |  | | | | | | |
| 身份证号码 | |  | | | 现工作单位 | | |  | | | | | | | | 报考岗位及编号 | |  |
| 配偶工作单位 | |  | | | | | 学历 | | | |  | | | 所学专业 | | | |  |
| 联系方式 | | 联系人： 移动电话： | | | | | | | | | | | | | | | | |
| 个人简历 | 年 月至 年 月  （从高中起填写） | | | 在何处学习、工作  （研究生以上写清研究方向、工作写清从事何种工作） | | | | | | | | | | | | | 任何职务 | |
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| 近三年  奖惩情况 | |  | | | | | | | | | | | | | | | | |

**注：**本人声明，以上填写内容均属实，如有虚假，本人承担所有责任并自觉放弃聘用资格。

签名：