考 生 报 名 登 记 表

附件2：

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 | |  | | | | | 性别 | |  | | | 政治面貌 | | | | |  | | | | 照 片 |
| 出生年月 | |  | | | | 参加工作时间 | | | | |  | | | 学历 | | | |  | | |
| 民 族 | |  | | | | 有何特长 | | |  | | | | | | | | | | | |
| 健康状况 | |  | | | | 婚姻状况 | | |  | | | 联系电话 | | |  | | | | | | |
| 身份证号码 | | | | | | | | |  | | | | | | | | | | | | |
| 何时何校毕业于何专业（第一学历） | | | | | | | | |  | | | | | | | | | | | | |
| 何时何校毕业于何专业（最高学历） | | | | | | | | |  | | | | | | | | | | | | |
| 现工作单位及职称 | | | | | | | | |  | | | | | | | | | | | | |
| 是否取得职称资格证 | | | | | 是 ，取得时间： ； 否 | | | | | | | | | | | | | | | | |
| 是否已经参加规培 | | | | | 是，参加时间： ，结业时间 ： ； 否 | | | | | | | | | | | | | | | | |
| 报考单位 | | | | |  | | | | | | | | 报考岗位 | | | | | |  | | |
| 个  人  简  历 |  | | | | | | | | | | | | | | | | | | | | |
| 主要社会关系 | 父亲 | | 姓名 |  | | | | 单位 | |  | | | | | | 联系电话 | | | |  | |
| 母亲 | | 姓名 |  | | | | 单位 | |  | | | | | | 联系电话 | | | |  | |
| 配偶 | | 姓名 |  | | | | 单位 | |  | | | | | | 联系电话 | | | |  | |
| 其它 | | 姓名 |  | | | | 单位 | |  | | | | | | 联系电话 | | | |  | |
| 资格审查意见 | 资格审查人： 审查时间： 年 月 日 | | | | | | | | | | | | | | | | | | | | |