附件2：

重庆市万盛经开区中医院2024年招聘报名表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 |  | 身份证号 | | | |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |
| 性别 |  | 民族 | |  | | | | | | | | | | | | | 相  片 | | | | | | | |
| 出生年月 |  | 户籍所在地 | |  | | | | | | | | | | | | |
| 学历 |  | 学位 | |  | | | | | | | | | | | | |
| 所学专业 |  | 政治面貌 | |  | | | | | | | | | | | | |
| 毕业时间及毕业院校 |  | | | | | | | | | | | | | | | |
| 报考岗位 |  | | | | | | | | | | | | | | | |
| 联系电话 |  | | 通讯地址 |  | | | | | | | | | | | | | | | | | | | | |
| 奖惩情况 |  | | | | | | | | | | | | | | | | | | | | | | | |
| 个人简历（从高中开始填写） |  | | | | | | | | | | | | | | | | | | | | | | | |
| **承诺** | | | | | | | | | | | | | | | | | | | | | | | | |
| 我郑重承诺，我填写的报名表信息和提交的报名材料是真实的，如填写的信息和提交的报名材料有虚假，自愿承担取消聘用资格的责任。  承诺人（签字）：  年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | |
| 初审意见 | | | | | 复审意见 | | | | | | | | | | | | | | | | | | | |
|  | | | | |  | | | | | | | | | | | | | | | | | | | |