**留学人员人才引进入户申报表**

填表日期： 年 月 日

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| **人员基本信息** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 姓名 |  | | | | | 性别 | | | | |  | | 民族 | | | | |  | | | | 出生日期 | | | | 年 月 日 | | |
| 身份证号码 |  |  | |  |  |  | |  |  | |  |  |  |  | | |  |  |  |  |  |  | |  | 婚姻状况 | |  | |
| 户籍地 |  | | | | | | | | | | 海外身份 | | | | |  | | | | | | | | | 留学类别 | |  | |
| 移动电话 |  | | | | | | | | | | **E-mail** | | | | |  | | | | | | | | | | | | |
| 通讯地址 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 最高学历  学位 |  | | | | | 留学国别/地区 | | | | |  | | | | | | | 出国（境）  日期 | | |  | | | | | 回国（境）日期 | |  |
| 国境外  学历学位 |  | | | | | 国境外  专业 | | | | |  | | | | | | | 国内  学历学位 | | |  | | | | | 国内专业 | |  |
| 认证书  编号 |  | | | | | | | | | | | | | | | | | 现工作  单位 | | |  | | | | | | | |
| **国内及国境外学习经历（自高中填起）** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 学习时间 | | | 毕业院校 | | | | | | | | | | | | | | | 所学专业 | | | | | | | 所获学位 | | | 授学位国 |
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| **国内及国境外工作经历** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 起止时间 | | | 工作单位 | | | | | | | | | | | | | | | | | | | | | | 担任职务 | | | |
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| **入户登记信息** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 原户口所在地址 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| 原户口登记机关 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| 拟迁入户口所在地址 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| 拟迁入户口登记机关 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| **随调迁家属信息** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 关系 | | | 姓名 | | | | | | | 性别 | | | | | 出生日期 | | | | | | | | 身份证号 | | | | | |
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| 原户口所在地址 | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| 原户口登记机关 | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **根据《广州市引进人才引进人才入户管理办法》第十一条规定，申请人应书面承诺提供的申请材料真实有效。经查实有虚假承诺或经有关部门查实，存在隐瞒、欺骗或提供虚假证明材料等情形的，其申请不予办理，并通报各入户审核部门，取消其申请资格5年，并录入个人信用记录；已通过入户审核的，由入户审核部门注销审核结果和入户卡并告知申请单位或申请人；已经入户的，公安机关根据入户审核部门提供的认定材料予以注销，退回原籍。存在以上情形时，申请人信息同时录入本市引进人才征信管理系统。**  **本人已知悉上述内容并承诺以上填报内容和提供的证件完全真实，如有不实，本人愿意承担由此产生的一切后果及相关责任。**  申请人签名：    年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 引进工作单位审核意见：  负责人签字： 引进工作单位盖章：  年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |