**茶山街道社区卫生服务中心求职报名表**

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| 应聘岗位 |  | | | | | | | | | | | | | |  |
| 姓名 |  | | | | 身份证号 | | |  | | | | | | |
| 出生年月 |  | | | 性别 |  | | | 民族 |  | | 健康状况 | |  | |
| 政治面貌 |  | | | 婚姻状况 |  | | | 户籍所在地 |  | | | | | |
| 最高学历 |  | | | 最高学位 |  | | | | | 专业技术职称 | |  | | | |
| 毕业年月 |  | | | 毕业院校 |  | | | | | 所学专业 | |  | | | |
| **工作经历** | | | | | | | | | | | | | | | |
| 起止时间 | | | 任职单位 | | | | 岗位 | | | | | 工作经历 | | | |
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| **学习经历（从高中或中专开始写，由高至低填写）** | | | | | | | | | | | | | | | |
| 起止时间 | | | 毕业院校 | | | 专业 | | | | 学历学位 | | | | 学习方式 | |
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|  | | |  | | |  | | | |  | | | |  | |
| 手机号码 | |  | | | | | | | | 邮编 | |  | | | |
| 联系地址 | |  | | | | | | | | | | | | | |
| 紧急联系人电话 | |  | | | | | | | | | | | | | |