麻江县蓝江移民后续发展有限公司报名表

填表日期:\_\_\_\_ 年\_\_\_ 月\_\_\_\_ 日

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 | |  | | 性 别 | | |  | | 联系电话 | | |  | | 照 片 |
| 籍 贯 | |  | | 民 族 | | |  | | 政治面貌 | | |  | |
| 身高(cm) | |  | | 健康状况 | | |  | | 婚姻状况 | | |  | |
| 体重(Kg) | |  | | 毕业院校 | | |  | | | | | | |
| 毕业时间 | |  | | 学 历 | | |  | | 所学专业 | | |  | | |
| 现居住地 | |  | | | | | | | 爱 好 | | |  | | |
| 身份证号 | |  | | | | | | | | | | | | |
| 教 育 背 景 | 时间 | | | | 学校/培训机构 | | | | 专业 | | | 取得证书 | | |
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| 工 作 经 历 | 工作时间 | | | | 工作单位 | | | | 工作岗位及职务 | | 离职原因 | | 证明人及联系电话 | |
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| 自我评价 |  | | | | | | | | | | | | | |
| 家庭成员 | 姓名 | | 性别 | | 年龄 | 相互关系 | | 工作单位 | | 联系电话 | | | | 备注 |
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注:填表人承诺，以上个人信息符合本人真实情况，如公司发现某些信息不符合填表人真实情况，公司将有权采取公司的相关制度予以解聘或相应的处罚!

                                                       签名:\_\_\_\_\_\_\_\_\_\_\_\_\_