岱山县残联公开招聘编外人员报名表

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 |  | | | | 性别 | |  | | （照片） |
| 身份证号码 |  | | | | 籍贯 | |  | |
| 出生年月 |  | | | | 婚姻状况 | |  | |
| 学 历 |  | | | | 政治面貌 | |  | |
| 毕业院校及专业 |  | | | | | | 毕业时间 | |  |
| 联系  方式 | 联系电话 | |  | | | | | | |
| 家庭住址 | |  | | | | | | |
| 现工作单位 |  | | | | | | | | |
| 工作（学习）简历 |  | | | | | | | | |
|  | | | | | | | | |
| 家庭主要成员及重要社会关系 | 称谓 | 姓名 | | 年龄 | | 政治面貌 | | 工作单位及职务 | |
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|  |  | |  | |  | |  | |
| 县残联审查意见 |  | | | | | | | | |