|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 成都市郫都区2021年公开考核招聘基层卫生类工作人员报名表

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 |  | 性 别 |  | 民族 |  | 政治面貌 |  | 照片 |
| 出生年月 |  | 原工作单位 |  |
| 现聘职称 |  | 专业 |  |
| 手机号码 |  | 身份证号码 |  |
| 毕业学校及专业 |  |
| 学  位 |  | 是否服从统筹安排 |  |
| 家庭详细地址 |  |
| 简历 |  |
| 特长 |  |
| 奖惩情况 |  |
| 初审意见（盖章） | 区卫健局审核人\_\_\_\_\_\_  （盖章） |

 |