重庆市江津精神康复院2019年面向社会公开招聘护士报名

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| 基本情况 | 姓名 |   | 性别 |   |   |
| 民族 |   | 出生年月 |   | 政治面貌 |   |
| 身份证号 |   | 籍贯 |   |
| 身高（cm） |   | 体重（kg） |   |
| 执业证书 |   | 技术职称 |   |
| 现住址 |   | 婚姻状况 |   |
| 有无工作经历 |   |
| 有何爱好特长 |   |
| 教育情况 | 毕业学校 |   | 最高学历 |   |
| 毕业专业 |   | 毕业时间 |   | 最高学历性质 |   |
| 学习工作经历   | 起止日期（\*年\*月~\*年\*月） | 学校/单位名称  | 专业或职务  | 学历、学位 |
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| 其他信息 | 通讯地址 |   | 联系电话 |   |
| 原工作单位 |   | 参加工作年限 |   |
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本人承诺：本人上述填写内容和提供的相关依据真实，符合招聘方案的报考条件。如有不实，本人自愿放弃聘用资格并承担相应责任。经本人核对录入的报名信息准确无误。                       报考人（签名）：                  年   月   日 |