附件：

**2016宁波第十八届高洽会宁波大红鹰学院公开招聘报名表**

报考岗位：

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 | | |  | | 身份证号 |  |  |  | |  |  | |  | |  |  | |  |  | |  | |  |  |  |  | |  | |  |  | 近期免冠  一寸照 |
| 户口  所在地 | | |  | | 民族 |  | | | | | | 性别 | | | | |  | | | | | 政治  面貌 | | | | |  | | | | |
| 最高  学历 | | | 全日制专业及时间 | |  | | | | | | | 学历、学位 | | | | | | | |  | | | | | | | | | | | |
| 在职学习专业及时间 | |  | | | | | | | 学历、学位 | | | | | | | |  | | | | | | | | | | | |
| 参加工作时间 | | |  | | 健康状况 |  | | | | | | 专业技  术职称及评定时间 | | | | | | | |  | | | | | | | | | | | | |
| 联系  地址 | | |  | | | | | | | | | | | | | | | | | 固定电话 | | | | | | | | |  | | | |
| 移动电话 | | | | | | | | |  | | | |
| E-mail | | |  | | | | | | | | | | | | | | | | | 邮 编 | | | | | | | | |  | | | |
| 所学专业 | | | |  | | | | | | | | | | | | | | | | 婚姻状况 | | | | | | | | |  | | | |
| 现工作单位 | | | |  | | | | | | | | | | | | | | | | 工作职务 | | | | | | | | |  | | | |
| 个  人  简  历 | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **本人声明：上述填写内容真实完整。如有不实，本人愿承担一切法律责任。**  户籍是 城镇 农村  **申请人（签名）： 年 月 日** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 人  事  处  审  核  意  见 | （盖章）  年 月 日 | | | | | | | | 身  份  证  复  印  件  粘  贴  处 | | | | | 正、反面复印 | | | | | | | | | | | | | | | | | | |

注意：以上表格内容填写必须真实齐全。要求随附工作、学习、论文、科研项目具体内容。