**深圳市优才人力资源有限公司招聘**

**妇科医生、行政辅助及财务报名表**

报名单位： 报名序号：

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| **基本情况** | | | | | | | | | | | | | | |
| 姓名 |  | 性别 |  | | | | 民族 | | |  | | 照  片 | | |
| 出生年月 |  | 籍贯 |  | | | | 政治面貌 | | |  | |
| 身高（cm） |  | 体重(kg) |  | | | | 婚姻状况 | | |  | |
| 学历（学位） |  | | 专业技术/能  职 称 | | | |  | | | | |
| 毕业院校及专业 |  | | | | | | | | | | | | | |
| 户口所在地 |  | | | | | 身份证号码 | |  | | | | | | |
| 现居住地址 |  | | | | | | | | | | | | | |
| 联系电话 |  | | | | 电子信箱 | | | | | |  | | | |
| **教育经历** | | | | | | | | | | | | | | |
| 起止年月 | 毕业院校 | | 所学专业 | | | | | | 学历/学位 | | | | 培养方式 | |
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| **工作经历（请另备个人简历）** | | | | | | | | | | | | | | |
| 起止年月 | 单位名称 | | | | | | | | 部门 | | | | | 职位 |
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| **报考信息** | | | | | | | | | | | | | | |
| **报考职位名称** | | | | **报考职位编号** | | | | | | | | | | |
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**注：籍贯填写到市一级，户口所在地填写到街道一级。**

**承 诺 书**

本人承诺：本表所填信息全部属实。本人符合招考公告规定的所有条件。如不符合，本人愿意承担由此造成的一切后果。

**承诺人： 年 月 日**