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| 照片 | 姓名 | |  | 性别 | |  | |
| 出生年月 | |  | 民族 | |  | |
| 政治面貌 | |  | 联系电话 | |  | |
| 籍贯 |  | | | 现居所在地 | |  | |
| 应聘学科岗位 |  | | | 应聘岗位序号 | |  | |
| 技术职称 |  | | | 退休时间 | | |  |
| 退休前工作单位及医院等级 | |  | | | | | |
| 工作经历 | | | | | | | |
| 起止日期 | 工作单位 | | | | 工作岗位 | | |
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|  |  | | | |  | | |
| 荣誉，奖项，备注 | | | | | | | |
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