附件3

西安城荣康养服务有限公司

面向社会公开招聘人才报名表

应聘岗位:

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| 个 人 信 息 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 姓 名 | |  | | | | | | 性 别 | | |  | | | | | 出生日期 | | |  | | | | | |  | |
| 民 族 | |  | | | | | | 籍 贯 | | |  | | | | | 婚姻状况 | | |  | | | | | |
| 健康状况 | |  | | | | | | 身 高 | | |  | | | | | 血 型 | | |  | | | | | |
| 政治面貌 | |  | | | | | | 入党/团时间 | | | | | | | |  | | | | | | | | |
| 身份证号 | |  | | | | | | | | | | | 电子邮箱 | | |  | | | | | | | | |
| 最高学历/学位 | |  | | | | | 毕业院校/毕业时间 | | | | | | | |  | | | | | | | | | 专业 | |  |
| 第一学历/学位 | |  | | | | | 毕业院校/毕业时间 | | | | | | | |  | | | | | | | | | 专业 | |  |
| 参加工作时间 | |  | | | | | | | | | | | 职 称 | | |  | | | | | 执业资格 | | | |  | |
| 户口所在地 | |  | | | | | | | | | | | 入司前档案所在机构名称 | | | | | | | |  | | | | | |
| 家庭住址 | |  | | | | | | | | | | | | | | | | | | | 邮政编码 | | | |  | |
| 手机号码 | |  | | | | | | | | | | 紧急联系人 | | | | |  | | | | 紧急联系方式 | | | |  | |
| 工 作 经 历 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 起讫时间 | | | | 工作单位 | | | | | | | | | | 部门、岗位 | | | | | | | | 主要职责 | | | | |
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| 学 习 经 历（从高中填起） | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 起讫时间 | | | 学校 | | | | | | | | | | | 专业 | | | | 学习形式 | | | | | 学历 | | | 学位 |
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| 主要工作业绩 | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 培 训 经 历 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 起讫时间 | | | | | 培训机构 | | | | | | | | | 培训内容 | | | | | | | | | | | 获得证书 | |
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| 获 奖 情 况 | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 技 能 描 述 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 所获资格证书及编号 | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| 特长/爱好 | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| 其他技能 | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| 家庭主要成员 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 与本人关系 | 姓名 | | | | | 年龄 | | | | 工作单位 | | | | | | | | | | 岗位/职务 | | | | | 联系电话 | |
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| 其 他 信 息 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 是否服从岗位调剂 | | | | | | | | | | | | | | 是/否 | | | | | | | | | | | | |
| 是否因违法、违规受过相应处分或不良记录 | | | | | | | | | | | | | | 是/否 | | | | | | | | | | | | |
| 本人声明：上述表格中所填写内容完全属实，如有虚假或有应填而未填事项的，本人愿意承担相应责任。  本人签名： 填表日期： | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **郑重声明**：  在您正式入职后，如发现您存在提供虚假信息或应填而未填等问题，公司将根据相关劳动法规进行处理。 | | | | | | | | | | | | | | | | | | | | | | | | | | |