附件

成都市武侯区助残社工服务站

2020年招聘社会化工作者报名表

|  |  |  |  |  |  |  |  |  |  |  |
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| **姓名** |  | | **性别** |  | **出生年月** | |  | | 照片 | |
| **籍贯** |  | | **婚姻**  **状况** |  | **政治面貌** | |  | |
| **民族** |  | | **学历** |  | | | | |
| **户籍所在地** | |  | | | | **身份证号** | |  | | |
| **现居住地** | |  | | | | **联系方式** | |  | | |
| **学习**  **经历** | **起止年月** | | | **毕业学校** | | | | **专业** | | **学历** |
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| **工作**  **简历** | **起止年月** | | | **工作单位** | | | | | **职务/岗位** | |
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| **自我鉴定(主要特长、特点**  **)** |  | | | |
| **撰写文章采用情况** |  | | | |
| **家庭主要成员及社会关系** | **姓名** | **称谓** | **年龄** | **工作单位及职务** |
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| 声明：我谨此保证上述表格填写的内容完全属实，且未隐瞒任何对我的应聘不利的事实或情况。  **申请人（签名）：** 年 月 日 | | | | |