湘潭医卫职业技术学院附属医院2023年第二批公开招聘

劳务派遣人员报名表

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| **姓 名** | |  | | **性 别** |  | **民 族** |  | **出生年月** |  | |
| **籍 贯** | |  | | **学 历** |  | **毕业院校**  **及专业** | |  | | |
| **参加工作**  **时 间** | |  | | **入党（团）时 间** |  | | **报名**  **岗位** | |  | |
| **现家庭住址** | | |  | | | | | | | |
| **本**  **人**  **主**  **要**  **简**  **历** | **起止时间** | | | **毕业院校（工作单位）及职务** | | | | | **政治面貌** | |
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| **家**  **庭**  **成**  **员** | **姓 名** | | **关 系** | **工作单位及职务** | | | | | | **政治面貌** |
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| **个人简介**  **（毕业学校及工作经历）** | **（含政治思想、道德品质、能力素质、遵纪守法、工作学习表现及工作实绩等）**    **签名：**  **年 月 日** |