附件二：

**四川蜀南文化旅游健康产业投资集团有限公司**

应聘人员报名表

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| 应聘岗位 |  | | | | | | | | | | | |
| 基本信息 | | | | | | | | | | | | |
| 姓 名 |  | | | | 性 别 |  | | | | 一寸免冠照片 | | |
| 民 族 |  | | | | 籍 贯 |  | | | |
| 出生年月 |  | | | | 政治面貌 |  | | | |
| 婚姻状况 |  | | | | 联系电话 |  | | | |
| 身份证号码 |  | | | | 家庭住址 |  | | | |
| 紧急联系人 |  | | | | 联系电话 |  | | | |
| 应聘者类型 | □应届毕业生 □有单位，在职 □无单位，待岗 □其它： | | | | | | | | | | | |
| 学历信息 | | | | | | | | | | | | |
| 入学时间 | 毕业时间 | | | 毕业院校 | | 学习专业 | | | 学历 | | | 学位 |
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| 学习期间  奖惩情况 |  | | | | | | | | | | | |
| 工作（实习）经历 | | | | | | | | | | | | |
| 起始时间 | 终止时间 | | | 工作单位 | | | | 岗位或职务  薪酬 | | | | 证明人 |
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| 工作期间  奖惩情况 |  | | | | | | | | | | | |
| 工作业绩 |  | | | | | | | | | | | |
| 社会关系 | | | | | | | | | | | | |
| 与本人关系 | 姓名 | | 工作单位 | | | | 岗位或职务 | | | | | 现居住地 |
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| 各类资格证书 | | | | | | | | | | | | |
| 证书名称 | | 获取时间 | | | 发证单位 | | | | | | 专业 | |
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| 特长爱好： | | | | | | | | | | | | |
| 原单位年收入情况：  应聘职位年收入期望值：  其他要求： | | | | | | | | | | | | |
| 本人承诺所填写的内容真实、完整、有效，并对所填内容承担责任。  签字确认：  年 月 日 | | | | | | | | | | | | |