**附件2：**

**土默特左旗人民医院应聘人员报名登记表**

**应聘岗位：**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **姓名** |  | | | | | | **性别** | |  | | **民族** | | |  | | | | **电话** |  | | | | | **照片**  **（近期免冠）** |
| **身份证号** | | |  | | | | | | | | | | | | | | **政治**  **面貌** | | | |  | | |
| **身高** |  | | | | **婚姻状况** | | |  | | **健康**  **状况** | | | | |  | | | | | **籍贯** | | |  | |
| **全日制学 历** | | | |  | | | | **毕业院校、专业、时间** | | | | | |  | | | | | | | | | | |
| **最高**  **学历** | |  | | | | | **取得方式、毕业院校、专业、时间** | | | | | | | | |  | | | | | | | | |
| **执业证**  **类 别** | |  | | | | | | | **取得时间** | | | |  | | | | | | | | | **注册单位** | |  |
| **现有最高资格证名称** | | | | | |  | | | **取得时间** | | |  | | | | | | | | | | | | |
| **其他资格证书取得情况** | | | | | |  | | | | | | | | | | | | | | | | | | |

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| **工**  **作**  **简**  **历** | **起止时间** | | **工作单位** | **担任职务** | **工作内容概括** |
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| **科研成果及获奖情况** | |  | | | |
| **职业规划（自述）** | |  | | | |