**中国医学装备协会应聘报名表（2024年）**

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| **应聘岗位** | **信息部工作人员** | | | | | | | | 二寸彩色证件照 |
| **姓名** |  | **性别** | |  | **民族** | | |  |
| **出生年月** |  | **政治面貌** | |  | **户籍** | | |  |
| **所学专业1** |  | **最高学历** | |  | **最高学位** | | |  |
| **所学专业2** | （选填） | **婚姻状况** | |  | **子女状况** | | |  |
| **毕业院校** |  | | | | | | | | |
| **现居住地** | 北京市XX区XX小区 | | | | **联系方式** | | |  | |
| **主要学习经历(从高中开始，可加行)** | | | | | | | | | |
| **时 间** | | **学 校** | | | | | **专 业** | | |
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| **主要工作经历（不间断，可加行）** | | | | | | | | | |
| **时 间** | | **单 位** | | | | | **职 务** | | |
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| **参与项目、课题情况（如实填写，可加行）** | | | | | | | | | |
| **时间** | | | **项目、课题名称** | | | **项目、课题成果** | | | |
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| **奖励或处罚情况（如实填写，可加行）** | | | | | | | | | |
| **时 间** | | **授予单位** | | | | | **奖励或处罚** | | |
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| **自我描述（300字以内）** | | | | | | | | | |