附件：

**青岛洁源环境有限公司**

应聘报名表

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| 报名岗位 | | | |  | | | | | | | | | | | | | | | | | | | | | | | 照片 | | | | |
| 姓 名 | | |  | | | | 性 别 | | | | |  | | | | 出生年月 | | |  | | | | | | | |
| 民 族 | | |  | | | | 婚姻状况 | | | | |  | | | | 工作时间 | | |  | | | | | | | |
| 政治面貌 | | | | |  | | | | | | 健康状况 | | | | |  | | | 英语水平 | | | | |  | | |
| 计算机水平 | | | | |  | | | | | | 身份证号 | | | | |  | | | | | | | | | | |
| 职称/技术等级 | | | | |  | | | | | | 现单位职务 | | | | |  | | | | | | | | | | | | | | | |
| 现家庭居住地址 | | | | |  | | | | | | | | | | | | | | 户籍所在地 | | | | | （填写某市公安局某派出所） | | | | | | | |
| 联系电话 | | | | |  | | | | | | | | | 电子邮箱 | | |  | | | | | | | | | | | | | | |
| 全日制学历 | | | | | 毕业院校 | | | |  | | | | | | | | | | | | | | | | 学 历 | | |  | | | |
| 所学专业 | | | |  | | | | | | | | | | | | | | | | 学 位 | | |  | | | |
| 后续学历 | | | | | 毕业院校 | | | |  | | | | | | | | | | | | | | | | 学 历 | | |  | | | |
| 所学专业 | | | |  | | | | | | | | | | | | | | | | 学 位 | | |  | | | |
| 工 作 简 历 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 由年月 | | | | 至年月 | | | | 在何单位何部门 | | | | | | | | | | | | | 从事何种工作 | | | | | | | | 任何职 | | |
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| 学 习 及 培 训 经 历 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 由年月 | | | | 至年月 | | | | | | 毕业院校及培训单位 | | | | | | | | | | 专业 | | | | | | | | | | 结果 | |
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| 工 作 业 绩 与 成 果（可 附 页） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 应 聘 人 员 社 会 关 系 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 配 偶 | | 姓 名 | | | |  | | | | | | | | | 出生年月 | | |  | | | | | 籍 贯 | | |  | | | | | |
| 工作单位及职务 | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| 子女 | | 姓名 | | | | 出生年月 | | | | | | | | | 就业（就学）单位 | | | | | | | | | | | | | | | | |
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| 是否具有以下情况（如有划“√”，如无划“×”） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 有违法、违纪或其它不良行为 | | | | | | | | | | | | 患精神病、传染病及其他严重疾病 | | | | | | | | | 被其他单位严惩、开除、辞退 | | | | | | | | | | |
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| 诚信承诺 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 本人承诺：上述信息及本人提供的材料真实有效，若有虚假，本人承担相应责任。  填表人（手印）：  年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |