附件2

报名登记表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **诚 信 承 诺 书**  我已仔细阅读《青岛西海岸新区香江路幼儿园教育集团未来城幼儿园公开招聘劳务派遣人员简章》，理解其内容，符合报名条件。我郑重承诺：本人所提供的个人信息、证明资料、证件、报名表所填写内容等均真实、准确、有效，并自觉遵守招聘工作的各项规定，诚实守信，严守纪律，认真履行报名人员义务。对因提供有关信息、证明材料、证件不实，不符合政策规定，或违反有关纪律规定所造成的后果，本人自愿承担一切责任。  **报名岗位代码： 报名人签名：** 年 月 日 | | | | | | | | | | | | | | | | | | | |
| **姓名** | |  | | **性别** | | | |  | | | | **出生年月** | | |  | | | 照片 | |
| **民族** | |  | | **籍贯** | | | |  | | | | **政治面貌** | | |  | | |
| **身份证号** | |  | | | | | | | | | | **联系方式** | | |  | | |
| **健康状况** | |  | | **口吃、重听、色盲等问题** | | | |  | | | | **婚姻状况** | | |  | | |
| **是否有既往病史** | |  | | **既往病史的详细说明** | | | |  | | | | | | | | | |
| **驾驶证** | |  | | **是否**  **退役士兵** | | | |  | | | | **入伍**  **起止日期** | | |  | | | | |
| **第一学历** |  | | **学位** | |  | **学校名称** | | | |  | | | | **专业** | |  | **毕业时间** | |  |
| **最高学历** |  | | **学位** | |  | **学校名称** | | | |  | | | | **专业** | |  | **毕业时间** | |  |
| **资格证书（一）** | | | | | | | | | | | | | | | | | | | |
| **证书名称** |  | | | | **证书编号** | |  | | | | | **发证单位** | |  | | | **发证日期** | |  |
| **资格证书（二）** | | | | | | | | | | | | | | | | | | | |
| **证书名称** |  | | | | **证书编号** | |  | | | | **发证单位** | | |  | | | **发证日期** | |  |
| **参加工作时间** | | | |  | | | | **现工作单位** | | | |  | | | | | | | |
| **户口**  **所在地** | |  | | | | | | | | | | | | | | | | | |
| **现住址** | |  | | | | | | | | | | | | | | | | | |
| **紧急**  **联系人** | |  | | | | | | | **联系电话** | | | | | |  | | | | |
| **学**  **习**  **简**  **历** | | **起止时间** | | | | | | **所在学校及院系** | | | | | | | | | | **专业** | |
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| **工**  **作**  **简**  **历** | | **起止时间** | | | | | | **所在单位**  **及部门** | | | | | **职务** | | **工作内容详述** | | | **证明人及**  **联系方式** | |
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| **主**  **要**  **家**  **庭**  **成**  **员**  **及**  **社**  **会**  **关**  **系** | | **家庭成员** | | | | | | **姓名** | | | | | **联系电话** | | **政治面貌** | | | **工作单位**  **及职务** | |
| 父亲 | | | | | |  | | | | |  | |  | | |  | |
| 母亲 | | | | | |  | | | | |  | |  | | |  | |
| 配偶 | | | | | |  | | | | |  | |  | | |  | |
| 子女 | | | | | |  | | | | |  | |  | | |  | |
| 兄弟 | | | | | |  | | | | |  | |  | | |  | |
| 姐妹 | | | | | |  | | | | |  | |  | | |  | |