延安市鼎源投资有限责任公司

招聘工作人员报名登记表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 应 聘  职 位 | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | 请贴二寸近期彩照 | | | | | | |
| 姓 名 | |  | | | | | 性 别 | |  | | | | | | 出生年月  (岁) | | | | | | |  | | | | | | |
| 民 族 | |  | | | | | 籍 贯 | |  | | | | | | 出生地 | | | | | | |  | | | | | | |
| 户 口  所在地 | |  | | | | | 政 治  面 貌 | |  | | | | | | 参加工  作时间 | | | | | | |  | | | | | | |
| 健 康  状 况 | |  | | | | 身份证  号 码 | | |  | | |  |  |  |  | | |  |  | |  | | | |  |  |  |  | |  |  |  |  |  |  |
| 专业技术职务任职资格或职(执)业资格 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 外语语种及水平 | |  | | | | | | | | | | | | | | 计算机水 平 | | | | | | | |  | | | | | | | | | | | |
| 学 历  学 位 | | 全日制  教 育 | | |  | | | | | 毕业院校及专 业 | | | | | |  | | | | | | | | | | | | | | | | | | | |
| 在 职  教 育 | | |  | | | | | 毕业院校及专 业 | | | | | |  | | | | | | | | | | | | | | | | | | | |
| 在 职  教 育 | | |  | | | | | 毕业院校及专 业 | | | | | |  | | | | | | | | | | | | | | | | | | | |
| 现工作单位及职务 | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 现主要负责工作 | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 通讯地址 | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 邮政编码 | | | |  | | | | | | | | | E-mail | | | | | | |  | | | | | | | | | | | | | | | |
| 固定电话 | | | |  | | | | | | | | | 移动电话 | | | | | | |  | | | | | | | | | | | | | | | |
| 教  育  经  历 | （自高中院校学习时间开始填写) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 培 训 经 历 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 工 作 经 历 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 近 年 主 要 工 作 业 绩 | （本人在工作中取得的突出业绩、主持的重大项目及影响） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 奖 惩 情 况 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 自 我 评 价 | （200字以内） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 家庭主要成员及重要社会关系 | 称谓 | | 姓名 | | | | | 性别 | | | 出生  年月 | | | | | | 政治  面貌 | | | | | | 工作单位及职务 | | | | | | | | | | | | |
| 父亲 | |  | | | | |  | | |  | | | | | |  | | | | | |  | | | | | | | | | | | | |
| 母亲 | |  | | | | |  | | |  | | | | | |  | | | | | |  | | | | | | | | | | | | |
| 备注 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**说明：**

1．项目中若有某项要求不符合您本人情况，可以不填写。

2．“健康状况”栏根据本人的具体情况填写“健康”“一般”或“较差”；有严重疾病、慢性疾病或身体伤残的，要如实填写。

3.“现工作单位隶属单位”栏填写现工作单位的上一级部门或单位，如没有则填写“无”。

4.“自我评价”栏请对自己的特点、能力、作风等方面进行简要描述。

5．表中有关项目，需进一步详细说明的，可在“备注”栏里注明。