合肥明巢高速公路有限公司

公开招聘报名登记表

**应聘岗位： 收费辅助工**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **基本**  **信息** | **姓名** |  | | | | | **性别** | |  | | **出生年月** | | | |  | | 照 片 |
| **籍贯** |  | | | | | **民族** | |  | | **婚姻**  **状况** | | | |  | |
| **健康状况** |  | | | | | **身高** | |  | | **体重** | | | |  | |
| **身份证号码** | | | |  | | | | | | | | | | | |
| **现工作单位及职务** | | | | | |  | | | | | | | | | | |
| **首次参加工作时间** | | | | |  | | | | **政治面貌** | |  | | | | **入党**  **时间** |  |
| **专业技术职称** | | | | |  | | | | | | **取得**  **时间** | | | |  | |
| **职业（执业）资格** | | | | |  | | | | | | **取得**  **时间** | | | |  | |
| **学习简历** | **教育**  **经历** | | **起止时间** | | | | | **院校** | | | | **专业** | | | | **学历**  **学位** | **教育类型**  **（是否全日制）** |
|  | | | | |  | | | |  | | | |  |  |
|  | | | | |  | | | |  | | | |  |  |
|  | | | | |  | | | |  | | | |  |  |
| **培训**  **经历** | | **起止时间** | | | | | **培训单位** | | | | | | | | **培训证书** | |
|  | | | | |  | | | | | | | |  | |
|  | | | | |  | | | | | | | |  | |
| **工作简历** | **起止时间** | | | | | **工作单位及岗位**（请简要描述工作内容） | | | | | | | | | | **证明人及联系方式** | |
|  | | | | |  | | | | | | | | | |  | |
|  | | | | |  | | | | | | | | | |  | |
|  | | | | |  | | | | | | | | | |  | |
|  | | | | |  | | | | | | | | | |  | |
| **家庭情况** | **家庭其他成员** | | | **关系** | | | | **姓名** | | | | **年龄** | | **职业** | | **工作单位** | |
|  | | | |  | | | |  | |  | |  | |
|  | | | |  | | | |  | |  | |  | |
|  | | | |  | | | |  | |  | |  | |
| **主要社会关系** | | |  | | | |  | | | |  | |  | |  | |
|  | | | |  | | | |  | |  | |  | |
| **个人业绩** | **工作**  **成果** | | |  | | | | | | | | | | | | | |
| **获奖**  **情况** | | |  | | | | | | | | | | | | | |
| **自我评价** | **兴趣**  **爱好** | | |  | | | | | | | | | | | | | |
| **专业**  **特长** | | |  | | | | | | | | | | | | | |
| **求职意向** | **期望薪酬待遇** | | | | |  | | | | | | | **现年收入（税前）** | | |  | |
| **联系方式** | **手机号码** | | | | |  | | | | | | | **电子邮箱** | | |  | |
| **本人保证以上信息真实可靠，提供的材料真实有效，符合应聘岗位所需的资格条件。如有弄虚作假，否承诺自动放弃考试和聘用资格。**  填表人（签名）： （提交书面材料时须由本人签字）  年 月 日 | | | | | | | | | | | | | | | | | |
| 备注 |  | | | | | | | | | | | | | | | | |