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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 附件：2021年舟山市国有企业公开招聘残疾人职工报名表报考单位：

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 姓名 |  | 出生年月 |  | 近期免冠一寸白底彩照 |
| 户口所在地 |  | 民族 |  | 性别 |  | 政治面貌 |  |
| 最高学历 | 普通高校 |  | 毕业时间 |  |
| 成人高校 |  |
| 参加工作时间 |  | 健康状况 |  | 专业技术资格 |  |
| 残疾类别 |  | 残疾等级 |  | 残疾人证号 |  |
| 联系地址 |  | 固定电话 |  |
| 移动电话 |  |
| E-mail |  | 邮    编 |  |
| 最高学历毕业院校 |  | 所学专业 |  |
| 现工作单位 |  | 身份证号码 |  |
| 个 人 简 历 |  |
| **本人承诺：上述填写内容和提供的相关依据真实，符合招聘公告的报考条件。如有不实，****弄虚作假，本人自愿放弃聘用资格并承担相应责任。****报考承诺人（签名）：                           年  月   日** |
| 备注 |  |

**注意：以上表格内容必须填写齐全。** |
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