**应聘人员信息登记表**

应聘岗位： 填表时间： 编号：JAEVRI-HR1-002

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| 姓 名 | | |  | | | | | | | | | 性 别 | | | | | | | □男 □女 | | | | | | | | 年 龄 |  | | | | | | 出生日期 | | | | | | | | | 年 月 日 | | | | | | | | | | | | | | | | |
| 民 族 | | |  | | | | | | | | | | | | | | | | 政治面貌 | | | | | | | | □无 党 派 □共产党员 □民主党派 □共青团员 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 籍 贯 | | | 省 市/县 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 婚姻状况 | | | | | | | | □未婚 □已婚 □离异 □丧偶 | | | | | | | | | | | | | | | | |
| 户籍地址 | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 现居住地 | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 身份证号 | | |  |  | |  |  |  | |  |  | |  | |  |  |  |  | |  |  |  |  |  | |  | 手机号码 | |  |  |  |  |  | |  |  |  |  | |  |  | 电子邮箱 | | | | | |  | | | | | | | | | | | |
| 健康状况 | | | □良好 □一般 □较弱 | | | | | | | | | | | | | | | | 病 史 | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 紧急联系人 | | |  | | | | | | | | | | | | | | | | 与本人关系 | | | | | | | |  | | | | | | | | | 联系电话 | | | | | | |  |  | |  | | |  |  | | |  |  | |  |  |  |  |
| 最高学历 | |  | | | | | | | 毕业学校 | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | 所学专业 | | | | | |  | | | | | | | | | | | | | | |
| 毕业时间 | | 年 月 | | | | | | | | | | | | 技能专长 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 教育经历 | 起始日期 | | | | 结束日期 | | | | | | | 教育/培训机构 | | | | | | | | | | | | | | | | | | | | | | 专业 | | | | | | | | | | | | | | | | | 学历 | | | | 证书 | | | | |
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| 工作经历 | 起始日期 | | | | 结束日期 | | | | | | | 工作单位 | | | | | | | | | | | | | | | | | | | | | | 职 务 | | | | | | | | | | | | | 离职原因 | | | | | | | | | | | | |
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| 奖惩情况 | 奖惩日期 | | | | 奖/惩单位 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 荣誉/处罚情况 | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 社会关系 | 称谓 | 姓名 | | | | | | | 年龄 | | | | | 任职单位 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 职务 | | | | | | | |
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| **本人承诺：**以上提供以及填写的资料均属实，如有虚假，本人愿承担一切责任，公司可随时与本人解除劳动关系。户籍地址、家庭住址、联系方式等发生变化时我会及时告知人事部门。  填表人： 日期： 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |