**2023年度安徽省疾病预防控制中心**

**高层次人才招聘报名表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 | |  | | | 身份证号 | | | |  | | | | | | | 照片 | | |
| 岗位代码 | |  | | | 性别 | |  | | 出生年月 | |  | | | | |
| 出生地 | |  | | | 政治  面貌 | |  | | 婚姻状况 | |  | | | | |
| 户口所在地 | |  | | | | | | | 民 族 | |  | | | | |
| 毕业学校 | |  | | | | | | | 所学专业（方向） | |  | | | | |
| 最高学历 | |  | | | | | | | 取得学历时间 | |  | | | | | | | |
| 最高学位 | |  | | | | | | | 取得学位时间 | |  | | | | | | | |
| 现工作单位、  职务、职称 | | |  | | | | | | | | 职称取得时间 | | | | |  | | |
| 电子邮箱 | | |  | | | | | | | | 联系电话 | | | | |  | | |
| 通讯地址 | | |  | | | | | | | | 邮 编 | | | | |  | | |
| 家庭详细地址 | | |  | | | | | | | | | | | | | | | |
| 海外学习/工作背景 | | |  | | | | | | | | | | | | | | | |
| 家庭主要成员 | 关系 | | 姓名 | | | 出生日期 | | | 政治面貌 | | | 工作单位及职务 | | | | | | |
|  | |  | | |  | | |  | | |  | | | | | | |
|  | |  | | |  | | |  | | |  | | | | | | |
|  | |  | | |  | | |  | | |  | | | | | | |
|  | |  | | |  | | |  | | |  | | | | | | |
| 大学及以上  学习  简历 | 起止年月 | | 获得学历  学位情况 | | | 毕业学校 | | | | | | 所学专业（方向） | | | | | | |
|  | |  | | |  | | | | | |  | | | | | | |
|  | |  | | |  | | | | | |  | | | | | | |
|  | |  | | |  | | | | | |  | | | | | | |
|  | |  | | |  | | | | | |  | | | | | | |
| 工作经历 | | 起止年月 | | 工作单位 | | | | | 职务、职称 | | | | | 具有何种行业资格证书 | | | | |
|  | |  | | | | |  | | | | |  | | | | |
|  | |  | | | | |  | | | | |  | | | | |
|  | |  | | | | |  | | | | |  | | | | |
| 论文论著情况 | | | | | | | | | | | | | | | | | | |
| 名称 | | | | | | | | 日 期 | | 出版社和书号或期刊名称、刊号、期号 | | | | | 类别 | | | 排名 |
|  | | | | | | | |  | |  | | | | |  | | |  |
| 说明：著作、教材要填写书名、撰写章节、撰写字数、出版社及书号；论文要填写论文题目、刊物名称、刊号、期号、类别。 | | | | | | | | | | | | | | | | | | |
| 承担教科研项目情况 | | | | | | | | | | | | | | | | | | |
| 名称 | | | | | | | | 立项单位 | | 时间 | | | 类别 | | 排名 | | 完成情况 | |
|  | | | | | | | |  | |  | | |  | |  | |  | |
| 获教科研奖励情况 | | | | | | | | | | | | | | | | | | |
| 名称 | | | | | | | | 授奖单位 | | | | | 时间 | | 类别 | | 排名 | |
|  | | | | | | | |  | | | | |  | |  | |  | |
| 其他业绩成果及需说明事项 | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **本人郑重承诺：以上所填写的信息完全真实，如有弄虚作假，则自动放弃考试和聘用资格，或由贵校实行“一票否决”。**  应聘人员（签名）：　　 年　　月　　日 | | | | | | | | | | | | | | | | | | |

注：相关材料，[请以附件形式用电子邮件发送至ahcdcrsk@ahcdc.com.cn](mailto:请以附件形式用电子邮件发送至ahyzrsc@126.com)；空格不够，可另附页。