**附件2：**

儋州市福利彩票销售管理中心公开招聘管理人员

报名登记表

报考职位：

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓　名 | | |  | | | 性　别 |  | | | 出　生  年　月 | | | | | |  | | | | | | | 照  片 | | | | | | | |
| 民　族 | | |  | | | 籍　贯 |  | | | | | | | | | | | | | | | |
| 参加工  作年月 | | |  | | | 入　党  年　月 |  | | | 健　康  状　况 | | | | | |  | | | | | | |
| 专业技术职称 | | | |  | | | 户籍所在地 | | | | |  | | | | | | | | | | |
| 学  历 | 全日制教 育 | | | |  | | 毕业院校  系及专业 | | |  | | | | | | | | | | | | | | | | | | | | |
| 在 职教 育 | | | |  | | 毕业院校  系及专业 | | |  | | | | | | | | | | | | | | | | | | | | |
| 工作单位  及职务 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| 联系电话 | | 手机：  宅电： | | | | | | 身份证号 |  |  |  | |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  |
| 个  人  简  历 | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 家庭主要成员姓名、与本人关系、工作单位及职务 | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 报  考  人  承  诺 | | 本人符合报名条件的要求，所提供的各种相关资料和上述填写内容真实有效。如有不实，本人愿自动放弃本次报考资格，并承担由此引发的一切后果。  报考人签名：  年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 资格  审查  意见 | | （盖章）  年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

1、此表一式两份 2、请保持通信畅通 儋州市民政局制