附件2：

泰州医药高新区实验小学2020年公开招聘教师报名表

报考岗位名称： 报考岗位代码：

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 姓名 | |  | 身份证号码 | |  |  |  |  |  | | |  |  |  | |  |  | |  |  | | |  |  |  |  |  |  |
| 性别 | |  | 民族 | |  | | | | | 籍贯 | | | | |  | | | | | | | 1寸  证件照  粘贴处 | | | | | | |
| 政治面貌 | |  | 参加工作  时间 | |  | | | | | 现任教年级及学科 | | | | |  | | | | | | |
| 第一学历 | |  | 毕业院校、  专业及时间 | |  | | | | | | | | | | | | | | | | |
| 最高学历 | |  | 毕业院校、  专业及时间 | |  | | | | | | | | | | | | | | | | |
| 专业技术职务资格  及取得时间 | | |  | | | | | | | 荣誉称号  及获评时间 | | | | | | | | | | | |  | | | | | | |
| 现任教年级及学科 | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| 户籍所在地 | | |  | | 家庭地址 | | | | |  | | | | | | | | | | | | | | | | | | |
| 电子邮箱 | |  | | | 联系电话 | | | | | 1. 2. | | | | | | | | | | | | | | | | | | |
| 个人  工作  简历 | | 工作单位 | | | 职务 | | | | | 起止时间 | | | | | | | | | | | | | | | | | | |
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| 奖惩情况 | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 家庭成员 | | 姓名 | | 关系 | 所在单位 | | | | | | | | | | | | | | | | 职务 | | | | | | | |
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| 是否存在《江苏省事业单位公开招聘人员办法》第三十六条回避关系 | | | | | | | | | | | | | | | | | | 🞎是 🞎否 | | | | | | | | | | |
| 信息  确认 | **本人对以上所填内容的真实性、准确性负责，如因选报岗位不当或所填写内容不真实、不准确、不全面而影响考试和聘用的，愿责任自负。**  签字：  年 　月 　日 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 资格  审核  意见 | | 初审意见：  🞎通过 🞎不通过  审核人：  2020年5月 日 | | | | | | | | | 复审意见：  🞎通过 🞎不通过  审核人：  2020年5月 日 | | | | | | | | | | | | | | | | | |