附件2

**福建漳州城投集团有限公司**

**职业经理人应聘人员登记表**

**应聘岗位：**

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| 姓 名 | |  | | | | 性 别 | | |  | | 出生年月 | |  | | | 籍 贯 | | |  | | | |  | |
| 最高学历 | |  | | | | 参加工作时间 | | |  | | 民 族 | |  | | | 身 高 | | |  | | | |
| 毕业院校 | |  | | | | 婚姻状况 | | | □已 □否 | | | 身份证号码 | | | |  | | | | | | |
| 所学专业 | |  | | | | 生育状况 | | | □已 □否 | | | 手机号码  /家庭电话 | | | |  | | | | | | |
| 学 位 | |  | | | | 职 称 | | |  | | | 何时参加  何党派 | | | |  | | | | | | |
| 执业资格证 书 | |  | | | | | | | | | | | | | | | | | | | | | | |
| 现住址 | |  | | | | | | | | | | 现供职于 | | | |  | | | | | | | | |
| 常用EMAIL | | | |  | | | | | | | | |
| 英语水平 | |  | | | 应聘岗位 | | |  | | | | | | | | | | | | 服从调剂 □是 □否 | | | | |
| 薪酬待遇 | | |  | | | | | | | | | | | |
| 原单位是否参保的险种： □养老 □医保 □失业 □工伤 □生育 □住房公积金 | | | | | | | | | | | | | | | | | | | | | | | | |
| **教 育 情 况** | | | | | | | | | | | | | | | | | | | | | | | | |
| 时 间 | | | | 学 校 | | | | | 专 业 | | | | | 全日制教育类型（本科、大专、中专等） | | | | | | | | | | 在职教育 |
| 年 月- 年 月 | | | |  | | | | |  | | | | |  | | | | | | | | | |  |
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| 年 月- 年 月 | | | |  | | | | |  | | | | |  | | | | | | | | | |  |
| **工 作 简 历** | | | | | | | | | | | | | | | | | | | | | | | | |
| 时 间 | | | | 工作单位及部门 | | | | | 职位 | | | | 薪酬 | | | | 离职原因 | | | | 奖惩情况 | | | |
| 年 月- 年 月 | | | |  | | | | |  | | | |  | | | |  | | | |  | | | |
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| 年 月- 年 月 | | | |  | | | | |  | | | |  | | | |  | | | |  | | | |
| **职 业 培 训 经 历** | | | | | | | | | | | | | | | | | | | | | | | | |
| 培训内容 | | | | 时 间 | | | | | 所获证书 | | | | | | | | | 培训方式 | | | | 说 明 | | |
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| **个 人 能 力 简 述** | | | | | | | | | | | | | | | | | | | | | | | | |
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| **家 庭 情 况** | | | | | | | | | | | | | | | | | | | | | | | | |
| 姓 名 | 与本人关系 | | 出生年月 | | | | 政治面貌 | | | 工作单位及职务 | | | | | 住 址 | | | | | | | 联系电话 | | |
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| **其 它 相 关 信 息** | | | | | | | | | | | | | | | | | | | | | | | | |
| 是否有亲属在福建漳州城投集团有限公司工作，如有，请写明姓名、亲属关系、部门及职务；如没有，请填“否”。 | | | | | | | | | | | | | | |  | | | | | | | | | |
| 是否与目前任职公司有服务期、竞业限制等约定，如有，请说明；如没有，请填写“否”。 | | | | | | | | | | | | | | |  | | | | | | | | | |
| 是否患重大疾病或家族遗传病史，如有，请详细告知；如没有，请填写“否”。 | | | | | | | | | | | | | | |  | | | | | | | | | |
| **本 人 承 诺** | | | | | | | | | | | | | | | | | | | | | | | | |
| 以上所填内容如有任何伪造、隐瞒，我将失去此次申请资格，即使将来被录用，也将导致无偿解雇，我在此授权，雇主可针对所填信息进行诚信调查。  应聘人： 日期： | | | | | | | | | | | | | | | | | | | | | | | | |