樊城区造价评审专业技术人员报名表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 姓 名 | | |  | | | 身份证号 | | |  |  |  | |  |  |  | | | | | | | | | | | | | | | |  |  |  |  | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 户 口  所在地 | | |  | | 民  族 | |  | | | | | | 性 别  政治  面貌 | |  | | | 政治  面貌 | | | | | |  | | |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 报考  岗位 | | | 专业技术协管岗位 □       综合岗位 □ | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 最 高  学 历 | | |  | | | | | | | | | | | 毕业时间 | | | | |  | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 最 高 学 历  毕 业 院 校 | | | | |  | | | | | | | | | | | | | 所学专业 | | | | | |  | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 参加工作  时 间 | | | |  | | | | 健康状况 | | | |  | | | | | | | 专业技术职 称 | | | | | |  | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 现工作  单 位 | | | |  | | | | | | | | | | | | | | 工作职务 | | | | | |  | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 联 系  地 址 | | | |  | | | | | | | | | | | | | | 移动电话 | | | | | |  | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 固定电话 | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 邮   编 | | | |  | | | | | | | | | | | | | | E-mail | | | | | |  | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 个  人  简  历 | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 家庭主要成员 | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 本人声明：上述填写内容真实完整。如有不实，本人愿承担一切法律责任。  报考人（签名）：                      年   月   日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 经办人审核  意见 | （审核人签字）  2017年 月  日 | | | | | | | | | | 报名  负责人  审核  意见 | | | （审核人签字）  2017年 月  日 | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

注：1、以上表格内容必须认真填写，字迹清晰；2、表间结构不得更改；3、联系方式如提供有误或无法联系上本人，后果自负。