**鄂尔多斯市中心医院引进**

**高层次人才和紧缺专业人才报名登记表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **报考岗位：** | | | | | | | | | | | | |
| **姓 名** | |  | | **性 别** | |  | **民 族** | |  | | | **照片** |
| **身份证号** | |  | | | | | **政治面貌** | |  | | |
| **出生日期** | |  | | **联系电话**  **备用电话** | | |  | | | | |
| **籍贯** | |  | | | | **现居住地** |  | | | | |
| **第一学历** | | **学 历** | | |  | | **所学专业** | | |  | | |
| **学 位** | | |  | | **毕业时间** | | |  | | |
| **毕业院校** | | |  | | **教育类别** | | |  | | |
| **最高学历** | | **学 历** | | |  | | **所学专业及**  **研究方向** | | |  | | |
| **学 位** | | |  | | **毕业时间** | | |  | | |
| **毕业院校** | | |  | | **教育类别** | | |  | | |
| **外语等级及分数** | | |  | | | | | **现有技术资格证书**  **名称及取得时间** | | |  | |
| **是否有规培证书** | | |  | | | | | **规培证书取得时间** | | |  | |
| **规培方向、时间及地点** | | | | |  | | | | | | | |
| **学习经历** |  | | | | | | | | | | | |
| **工作经历** |  | | | | | | | | | | | |
| **技术能力业绩成果** |  | | | | | | | | | | | |
| **承诺说明** | **本人承诺并保证所填写信息及发送材料真实有效，如有虚假，愿承担相应责任。 考生签字：**  **年 月 日** | | | | | | | | | | | |