附件

余姚市部分机关单位公开选调公务员报名登记表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 姓名 |  | | | | | 性别 | | | | |  | | | | | | 籍贯 | | | |  | | | | | | 政治  面貌 | | | |  | | | 照片 |
| 出生年月 |  | | | | | 参加工作时间 | | | | |  | | | | | | 入党时间 | | | |  | | | | | | 健康状况 | | | |  | | |
| 身份  证号 |  |  |  | |  | |  | |  | | |  |  | |  | | |  |  | | |  |  | |  | | |  | |  | |  |  |
| 学历  学位 | 全日制教育 | | |  | | | | | | 毕业时间 | | | |  | | | | | | 毕业院校及专业 | | | | | | | | |  | | | | | |
| 在职  教育 | | |  | | | | | | 毕业时间 | | | |  | | | | | | 毕业院校及专业 | | | | | | | | |  | | | | | |
| 现工作单位及职务 |  | | | | | | | | | | | | | | | | 人员身份及  录用时间 | | | | | | | | | | □公务员  □参照公务员法管理单位工作  人员  录用时间： | | | | | | | |
| 现单位  工作时间 |  | | | | | | | | | | | | | | | |
| 报考单位及职位 |  | | | | | | | | | | | | | | | | 手机 | | | | | | | | | |  | | | | | | | |
| 本  人  简  历 | （从大学写起） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 历年年度考核情况 | （近三年） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 家庭主要成员及重要社会关系 | 称谓 | | | | 姓名 | | | 出生年月 | | | | | | | | | | 政治面貌 | | | | | | 工作单位及职务 | | | | | | | | | | |
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| 真实性  承诺 | **本人申明:以上情况属实，如有虚假，愿意放弃选调资格。**    本人签名： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 所在单位意 见 | （盖章）  年 月 日 | | | | | | | | | | | | | | | 的主管部门意见  意 | | | | | | | | | | 统  （盖章）  年 月 日 | | | | | | | | |

备注：报名人员的直系血亲关系、三代以内旁系血亲关系以及近姻亲关系中有机关事业人员的，必须如实填写，如有隐瞒，后果自负。