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| |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **公益性岗位报名登记表** | | | | | | | | | | 姓 名 |  | 性 别 | |  | 民 族 |  | 照片  （电子档） | | | 出生年月 |  | 政治面貌 | |  | 籍 贯 |  | | 身份证号 |  | | | | 联系电话 |  | | 户籍所在地 |  | | | | | | | 全日制教育 | 毕业院校及毕业时间 | |  | | | | | | | 所学专业 | |  | | | | | | | 在职教育 | 毕业院校 | |  | | | | | | | 所学专业 | |  | | | | | | | 简历 |  | | | | | | | | | 家庭主 要成员及职业情况 |  | | | | | | | | | 奖惩情况 |  | | | | | | | | | 备注 |  | | | | | | | | |