附件

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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 |  |

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