**宁波能源应聘人员登记表**

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| **姓**  **名** | **现 名** | |  | | | | **性 别** | | |  | | | **民 族** | | | |  | | | | 1寸免冠照  （请务必在此添加电子照片） | | |
| **曾用名** | |  | | | | **出生日期** | | |  | | | **婚姻状况** | | | |  | | | |
| **出生地** | | |  | | | | **籍 贯** | | |  | | | **健康状况** | | | |  | | | |
| **政治面貌** | | |  | | | | **加入年月** | | |  | | | **参加工作年月** | | | |  | | | |
| **身 高** | | |  | | | | **体 重** | | |  | | | **现居地** | | | |  | | | |
| **联系电话** | | |  | | | | | | | | | **电子邮箱** | | | |  | | | | | | | |
| **应聘岗位** | | |  | | | | | | | | | | | | | | | | | | | | |
| **专业资格**  **持证情况** | | |  | | | | | | | | | | | | | | | | | | | | |
| **外语程度** | | |  | | | | | | | | | | | | | | | | | | | | |
| **奖惩情况** | | |  | | | | | | | | | | | | | | | | | | | | |
| **人事档案**  **保管机构** | | |  | | | | | | | | | | | | | | | | | | | | |
| **是否有亲属**  **在我司工作** | | | 否 □  是 □ | | | | | 姓名 职务 与本人关系 | | | | | | | | | | | | | | | |
| **教育经历（从高中填起）** | | | | | | | | | | | | | | | | | | | | | | | |
| **起止年月** | | | | **院校** | | | | | | | **系、专业** | | | | **学历** | | | | **是否**  **统招** | **是否**  **全日制** | | | **证明人** |
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| **实习/工作经历** | | | | | | | | | | | | | | | | | | | | | | | |
| **起止年月** | | | | | **工作单位** | | | | | | **部门** | | | **职务** | | | | **证明人**  **（直接上级）** | | | | **联系电话** | |
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| 可插入行 | | | | |  | | | | | |  | | |  | | | |  | | | |  | |
| **家庭主要成员（自愿填写）** | | | | | | | | | | | | | | | | | | | | | | | |
| **称谓** | | **姓 名** | | | | **出生年月** | | | **工作单位及职务** | | | | | | | | | | | | | | |
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| **其他需要说明的情况：**  包括但不限于以下内容：  1、社会实践、学生工作经历等  2、重大疾病情况。  **如无需要说明的情况请填写“无”。** | | | | | | | | | | | | | | | | | | | | | | | |
| **应聘须知：**  1.应聘人员需提供与表格一致的在读证明或学历学位证扫描件（如为境外学历需同步提供教育部学历认证），信息中如涉及到专业证书、职务任命、重要奖惩信息的，需提供相关证明文件；  2.应聘人员须依据我司招聘要求，提供真实可靠的个人信息，公司将通过第三方征信服务机构对所提供信息真实性进行核查；  3.严禁伪造、涂改证件、证明，篡改工作、教育经历，隐瞒可能影响公司判断的重要情况或以其他不正当手段获取应聘资格，凡违反招聘规定的应聘人员，公司将取消其应聘资格；对已录用人员，一经查实，公司将解除劳动合同，予以辞退。若在此过程中造成公司经济损失的，需承担相应的经济赔偿责任。 | | | | | | | | | | | | | | | | | | | | | | | |
| **声明：**  本人已仔细阅读应聘须知，并证实上述填写的各项资料内容真实完整，无掩饰任何不利申请此岗位之资料。本人自愿承担因隐瞒事实而带来的一切后果。  本人已知晓并接受公司或公司指定的第三方机构对我进行背景调查，并在此给予授权。  申请人签名：  日期： | | | | | | | | | | | | | | | | | | | | | | | |