附件

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| 曲靖智慧停车管理服务有限公司报名表 | | | | | | | | | |
| 报名岗位 |  | | | | | | | | |
| **基本信息** | | | | | | | | | |
| 姓 名 |  | | 性 别 | |  | | 民 族 | |  |
| 出生年月 |  | | 政治面貌 | |  | | 婚姻状况 | |  |
| 身份证号码 |  | | 手机号码 |  | | | | | |
| 电子邮箱 |  | | | | | | | | |
| 学历 |  | | 学历类型 |  | | | | | |
| 毕业院校 |  | | 专业 |  | | | | | |
| 职称/职业资格 |  | | | | | | | | |
| 工作单位 |  | | | 现任职务 | | | |  | |
| 参加工作时间 |  | | | | 是否接受岗位调剂 | | |  | |
| **工作简历（从大中专院校学习开始填写）** | | | | | | | | | |
| 起止时间 | | 工作单位 | | | | 职务 | | | |
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| 声明： | | | | | | | | | |
| 本人保证以上内容全部属实，且本人愿意承担因不实内容引发的一切后果。 | | | | | | | | | |
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| **本人签名（需本人亲笔签名）：**  日期： **年 月 日** | | | | | | | | | |
| **备注：相关学历、职称、或职业资格证书复印件请附表后。** | | | | | | | | | |