附件2

**2024年丹江口市第二次事业单位公开招聘工作人员**

**资格复审确认表**

报考单位： 报考岗位代码：

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 姓名 | | |  | | | 身份证号 | | |  |  |  | | |  |  | |  |  |  |  | |  |  |  |  |  |  | |  | |  |  |  |
| 户口  所在地 | | |  | | 民族 | |  | | | | | | | 性别 | | | |  | | | 政治面貌 | | | | | | |  | | | | |
| 报考  学历 | | |  | | | | | | | | | | | | | 毕 业  时 间 | | | | |  | | | | | | | | | | | |
| 报考学历  毕业院校 | | | |  | | | | | | | | | 所学专业 | | | | | | | |  | | | | | | | | | | | |
| 参加工作  时间 | | | |  | | | | 健康状况 | | | |  | | | | | | | | | 职称、职（执、从）业证书 | | | | | | | | |  | | | |
| 现工作  单位 | | | |  | | | | | | | | | | | | | | | | | 工作职务 | | | | | | | | |  | | | |
| 联系  地址 | | | |  | | | | | | | | | | | | | | | | | 移动电话 | | | | | | | | |  | | | |
| 学习和工作经历（从高中开始） | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 家庭成员及工作单位 | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 本人声明：上述填写内容真实完整。如有不实，本人愿承担一切法律责任。  报考人（签名）： 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 报考单位资格复审意见 | □经复审，符合报考条件；  □经复审，不符合报考条件，原因  审核人签字：1、 2、  202 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

注：以上表格内容必须认真填写，字迹清晰。