附件2

**贵州乌江能源黔南抽水蓄能有限责任公司2025年度招聘报名表**

**报名序号：**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 姓 名 |  | | | | | 性 别 | | | | | | | |  | | | | | | | | 出生年月 | | | |  | | | | | 照片 | | | |
| 民 族 |  | | | | | 籍 贯 | | | | | | | |  | | | | | | | | 出 生 地 | | | |  | | | | |
| 户口所在地 |  | | | | | | | | | | | | | | | | | | | | | 婚姻状况 | | | |  | | | | |
| 健康状况 |  | | | | | 是否有过往病史 | | | | | | | | | | | | | | | |  | | | | | | | | |
| 参加工作时间 |  | | | | | 政治面貌 | | | | | | | |  | | | | | | | | 入党时间  （预备） | | | |  | | | | |
| 最高学历 |  | | | | | 最高学位 | | | | | | | |  | | | | | | | | 所学专业 | | | | | | |  | | | | | |
| 是否符合专业比对条件 | | | | | |  | | | | | | | | | | | | | | | | 身份证号 | | | | | | |  | | | | | |
| 移动电话 |  | | | | | 固定电话 | | | | | | | |  | | | | | | | | Email地址 | | | |  | | | | | | | | |
| 现居住地址 |  | | | | | | | | | | | | | | | | | | | | | 邮政编码 | | | |  | | | | | | | | |
| 工作年限 | |  | | | | | | | | | | | | 可以开始工作时间 | | | | | | | | | | | |  | | | | | | | | |
| 当前月薪酬（税前） | |  | | | | | | | | | | | | 期望月薪酬（税前） | | | | | | | | | | | |  | | | | | | | | |
| 教育经历  （从高中开始填起） | 起止时间 | | | | | | | | | | | | | 学校名称 | | | | | | | | | | | | 学历类别 | | | | | | 专业 | | |
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| 工作经历 | 起止时间 | | | 工作单位 | | | | | | | | 部门、岗位 | | | | | | | 职务、职级 | | | | | 主要工作职责 | | | | | | 上级主管及电话 | | | 人力资源部联系人及电话 | |
|  | | | |  | | | | | | | |  | | | | | | |  | | | | |  | | | | |  | | | |  |
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| 家庭成员 | 姓名 | | | | | | 与本人关系 | | | | | | | | 工作单位 | | | | | | | | 职务 | | | | | | 政治面貌 | | | | | |
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| 主要社会关系 | 姓名 | | | | | | | | 与本人关系 | | | | | | | | 工作单位 | | | | | | 职务 | | | | | | 政治面貌 | | | | | |
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| 技能/资格证书 | 获取日期 | | | | | | | | | | 类别 | | | | | | | | | | | | 名称 | | | | | | 证书颁发单位 | | | | | |
|  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | |  | | | | | |
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| 主要业绩及应聘理由 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 其他需要说明事项 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 亲属在本公司工作情况 | 亲属姓名 | | | | | | | | | 与本人关系 | | | | | | | | | | | 工作单位及部门 | | | | | | 职务 | | | | | | | |
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|  | | | | | | | | |  | | | | | | | | | | |  | | | | | |  | | | | | | | |
| 目前是否与其他用人单位建立了劳动关系 | | |  | | | | | | | | | | | | | | | 是否有家族遗传病史 | | | | | | | | | |  | | | | | | |
| 是否与目前任职公司有服务期、竞业限制等约定 | | |  | | | | | | | | | | | | | | | 是否参加了/参加过任何非法组织或团体 | | | | | | | | | |  | | | | | | |
| 是否在报到之前能否将个人人事档案转入公司 | | |  | | | | | | | | | | | | | | | 是否服从岗位调剂 | | | | | | | | | |  | | | | | | |

本人承诺：以上陈述及回答内容均属实；如与事实有任何不符，本人认同并接受公司在知悉真实情况时做出的任何处理结果，并愿承担一切法律责任。