**河南大学第一附属医院博（硕）毕业生应聘报名表**

**应聘专业（科室）： 研究方向**：      

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| **一、申请人基本信息** | | | | | | | | | | | | | | | | | | | | | | | |
| 姓名 | |  | | 性别 |  | 出生  日期 | | |  | | | | | | | | | 民族 | |  | | | 本人照片 |
| 政治面貌 | | | |  | | | | | 籍贯 | | | |  | | | 导师姓名 | | | |  | | |
| 攻读学位（专硕/学硕） | | |  | 专业名称 | |  | | | 身份证号 | | | | |  | | | | | | | | |
| 培养方式 | | |  | 有无医师资格证 | | | |  | | | | 有无规培证书 | | | | |  | | | | | |
| 婚姻状况 | | |  | 配偶工作单位  及从事专业 | | | | | | |  | | | | | | | | | | | | |
| 家庭住址 | | |  | | | | | | | | 本年度是否报考博士研究生 | | | | | | | | | |  | | |
| 健康状况 | | |  | | 电子信箱 | | |  | | | | | | | | 联系电话 | | | | |  | | |
| **二、学习及工作简历（自高中起）** | | | | | | | | | | | | | | | | | | | | | | | |
| 学    习    经    历 | 起止时间 | | | 所   在   学   校 | | | | | | | | | | | 专  业 | | | | | | | 学  位 | |
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| 工  作  实习  经  历 | 起止时间 | | | 所   在   单   位 | | | | | | | | | | | 从事专业 | | | | | | | 工作岗位 | |
| / —    / | | |  | | | | | | | | | | |  | | | | | | |  | |
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| / —    / | | |  | | | | | | | | | | |  | | | | | | |  | |
| 外语能力（语种/级别） | | | |  | | | | | | 是否同意调剂到  其他专业 | | | | | | | | |  | | | | |
| 个人优势 | | | |  | | | | | | | | | | | | | | | | | | | |
| 学位论文情况 | | | | 硕士论文题目 | | |  | | | | | | | | | | | | | | | | |
| 博士论文题目 | | |  | | | | | | | | | | | | | | | | |
| 个人声明：本人保证所提交信息的真实性、合法性，承担因填写不实而产生的一切后果。  签名：打上即可 | | | | | | | | | | | | | | | | | | | | | | | |