附件2：

北京中医药大学中医学院聘用非事业编制人员信息登记表

**注意事项：请如实认真填写此表，切勿留空白项；若确实没有相关信息，请填写“无”。**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名/曾用名 | | |  | | | | | 身份证号 | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | 照  片 |
| 出生 日期 | | |  | | | | | 性别 | | | |  | 籍贯 | | 省市 | | | | | | | | 出生地 | | | | | | 省市 | | | | | | | | |
| 民族 | | |  | | | | | 政治面貌 | | | |  | | | 婚姻状况 | | | | | |  | | 生育状况 | | | | | |  | | | | | | | | |
| 手机 | | |  | | | | | | | | | Email： | | |  | | | | | | | | | | | | |  | | | | | | | | | |
| 户口 所在地 | | | 省市 | | | | | | | | | 户口性质 | □本地城镇，□本地农村  □其他城镇，□其他农村 | | | | | | | | | | | | | | | 工作居住证：□有，□无  编号： | | | | | | | | | | |
| 最高 学历 | | |  | | | | 毕业时间 | | 年月 | | | | 毕业院校 | |  | | | | | | | | | | | | | 专业 | |  | | | | | | | | |
| 具有何种职业资格 | | | | |  | | | | | | | | | | 前用人 单位 | | | | |  | | | | | | | | | | | | | 所任 职务 |  | | | | |
| 拟聘岗位 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 是否与我校各类在职人员存在直系亲属关系：□是，□否 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 家庭地址 | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 人事档  案关系 | | | 存档单位：  存档时间： | | | | | | | | | | | | | 档案是否存在问题 | | | | | | | | | | | □无问题，□思想政治问题，□业务问题  □其他情况\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |
| 党员组织关系 | | | 入党时间：年月 | | | | | | | | | | | | | 原党组织联系方式 | | | | | | | | | |  | | | | | | | | | | | | |
| 社会保险 （养老、失业、工伤） | | | | | | | | □有，□无  □本地，□其他 | | | | | | 基本医疗 保险 | | | □有，□无  □本地，□其他 | | | | | | | | | | | | | | 住房 公积金 | | | | | □有，□无  □本地，□其他 | | |
| **主要教育经历（由大学起）** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **教育时间** | | | | | | | | | | | **院校名称** | | | | | | | | | | | **专业** | | | | | | | | | | **学历** | | | | | **学位** | | |
| 年月～年月 | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | |  | | |
| 年月～年月 | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | |  | | |
| 年月～年月 | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | |  | | | | |  | | |
| **主要工作经历** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **工作时间** | | | | | | | | | | | **工作单位** | | | | | | | | **职位** | | | | | | **主要从事** | | | | | | | | | | **离职原因** | | | | |
| 年月～年月 | | | | | | | | | | |  | | | | | | | |  | | | | | |  | | | | | | | | | |  | | | | |
| 年月～年月 | | | | | | | | | | |  | | | | | | | |  | | | | | |  | | | | | | | | | |  | | | | |
| 年月～年月 | | | | | | | | | | |  | | | | | | | |  | | | | | |  | | | | | | | | | |  | | | | |
| 年月～年月 | | | | | | | | | | |  | | | | | | | |  | | | | | |  | | | | | | | | | |  | | | | |
| **前用人单位等信息** | | | | 离职时间 | | | | | | |  | | | | | | | 离职原因 | | | | | |  | | | | | | | | | | | | | | | |
| 是否与前用人单位约定了保密协议与竞业限制条款：□是，□否  若“是”，则：□管制期限已过，□但与我单位无业务关联 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 是否与前用人单位有未尽的法律事宜：□否，□是（请简要描述：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 是否曾经或正在追究与承担过刑责：□否，□是（请简要描述：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 主要家庭成员 | 姓名 | | | | | 关系 | | | | 出生时间 | | | 工作单位 | | | | | | | | | | | | | | | | | | | | | | | | | 联系电话 |
|  | | | | |  | | | | 年月 | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | | | | |  | | | | 年月 | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | | | | |  | | | | 年月 | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | | | | |  | | | | 年月 | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | | | | |  | | | | 年月 | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | | | | |  | | | | 年月 | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 近亲属工作单位是否与学校存在业务关联：□是 □否 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 本人声明：此表注意事项已阅读，以上情况均如实、正确填写。  签字： 日期： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **备 注** | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**支撑材料1**

|  |
| --- |
| 学历证书扫描件（必须提供项） |

**支撑材料2**

|  |
| --- |
| 学位证书扫描件（应聘条件有要求的岗位必须提供） |

**支撑材料3**

|  |
| --- |
| 身份证正、反面扫描件（必须提供项） |

**支撑材料4**

|  |
| --- |
| 思想政治、无处分情况证明（必须提供项）  （由人事档案管理部门或原单位出具证明。如开具证明确有困难，须本人提供个人情况说明并承诺签字） |

**支撑材料5**

|  |
| --- |
| 其他材料扫描件 |