**恒邦财产保险股份有限公司（筹）应聘人员登记表**

彩色生活照片

姓 名： 学历/专业：

性 别： 现工作单位：

出生日期： 应聘岗位：

婚姻状况： 联系电话：

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| 姓名 | |  | | | | 性别 | | | |  | | | 出生年月 | | | | | |  | | | | | | | | 民族 |  | | | |
| 专业 | |  | | | | 政治面貌 | | | |  | | | 籍贯 | | | | | |  | 户口所在地 | | | | | | | | | | |  |
| 学历 | |  | | | | | | | | 毕业院校 | | | | | |  | | | | | | | | | | | | | | | |
| 身高 | | cm | | | | 体重 | | | | kg | | | 血型 | | | | | |  | 婚否 | | | | | | | | |  | | |
| 现家庭住址 | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| 联系电话 | | | | | |  | | | | | | 本人邮箱 | | | | | |  | | | | | | | | | | | | | |
| 外语种类/熟练程度 | | | | | |  | | | | | | 计算机水平 | | | | | |  | | | | | | | | | | | | | |
| 职称/技能证书 | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| 全日制第一学历毕业院校 | | | | | |  | | | | | | 学历/学位 | | | | | |  | | | | | | | | | | | | | |
| 最高学历毕业院校 | | | | | |  | | | | | | 学历/学位 | | | | | |  | | | | | | | | | | | | | |
| 原工作单位岗位 | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| 保险公司从业年限 | | | | | |  | | | | | | 特长兴趣 | | | | | |  | | | | | | | | | | | | | |
| 原单位薪资 | | | | | | 元/年（其中固定收入： 元，不固定收入： 元） | | | | | | | | | | | | | | | | | | | | | | | | | |
| 期望薪资 | | | | | | 元/月 元/年 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 应聘部门 | | | | | |  | | | | | | | | | | | 应聘岗位 | | | | | | | |  | | | | | | |
| 应聘原因 | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| 恒邦有无亲属 | | | | | | □有 （姓名： ） □无 | | | | | | | | | | | | | | | | | | | | | | | | | |
| **本 人 主 要 工 作 经 历** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 起 | | | 止 | | | | 工作单位 | | | | | | | | | | 职位 | | | | | 证明人 | | | | | | | 联系方式 | | |
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| **教 育 及 培 训（高中写起）** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 起 | | | 止 | | | | 学校或教育机构名称 | | | | | | | | | | 专业 | | | | 证明人 | | | | | | | | | 联系方式 | |
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| **所获的主要奖励** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 时间 | | | | | 奖项 | | | | | | | | | 证明人 | | | | | | | | | | | | 联系方式 | | | | | |
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| **我们会根据您提供的资料进行相关背景调查，请您提供曾经工作过的单位三位证明人姓名及联系方式，我们将对调查内容保密。** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 姓名 | | |  | | | | | 电话 | | |  | | | | 工作单位及职务 | | | | | | | |  | | | | | | | | |
| 姓名 | | |  | | | | | 电话 | | |  | | | | 工作单位及职务 | | | | | | | |  | | | | | | | | |
| 姓名 | | |  | | | | | 电话 | | |  | | | | 工作单位及职务 | | | | | | | |  | | | | | | | | |
| 家庭成员 | 关系 | | | 姓名 | | | | 年龄 | 联系电话 | | | | 工作单位及职务 | | | | | | | | | | | | | | | | | | |
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| **个人**  **声明** | | **本人郑重声明，本资料表之各项内容均为属实。如有任何虚假或隐瞒，本人愿承担相应的法律责任及愿接受无偿之解雇。**  **本人签字： 年 月 日** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |