**苏州城市学院公开招聘高层次人才报名表**

**应聘岗位及二级单位：**

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| 姓名 |  | | | | | 性别 | | |  | | | 出生  年月 | |  | | | | 民族 |  | | | | | | | 电子照片 | | |
| 政治面貌 |  | | | | | 国籍 | | |  | | | 籍贯 | |  | | | | 出生地 |  | | | | | | |
| 参加工作  时间 |  | | | | | 婚姻  状况 | | |  | | | 健康  状况 | |  | | | | 是否应届毕业生 |  | | | | | | |
| 最高学历  （学位）及获得时间 |  | | | | | 最高学历（学位）毕业院校及专业 | | | | | |  | | | | | | 现专业技术职务及  获得时间 |  | | | | | | | | | |
| 研究领域  及方向 |  | | | | | | | | | | | | 博士生导师姓名 | | | | |  | 导师联系电话 | | | | | | |  | | |
| 是否具有海外经历（有/无） |  | | | | | 海外背景类型（填博士/博士后/访问学者/工作/联合培养等） | | | | | | | |  | | | | | 海外学习工作单位及时间 | | | | | | |  | | |
| 现工作  单 位 |  | | | | | 现行政  职务 | | | | | |  | | | | | | 现从事专业 |  | | | | | | | | | |
| 曾获人才项目名称及时间 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 手机号码 | 国内 | | |  | | | | | | | | | | 办公/住宅电话 | | | | |  | | | | | | | | | |
| 国外 | | |  | | | | | | | | | | 电子邮箱 | | | | |  | | | | | | | | | |
| 应聘岗位 |  | | | | | | | | | | 拟任教本科专业 | | | | |  | | | | | | | | | | | | |
| 人事档案所在  单位及地址 | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 学习经历  （从大学  填起） | 学习时间 | | | | | | | | | 学习单位 | | | | | | | 专业 | | | | | 取得学历/学位 | | | | | | |
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| 工  作  经  历 | 工作（任职）时间 | | | | | | | | | | | 工作单位 | | | | | | | 职称/职务 | | | | | | | | | |
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| 社会兼职 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 所获荣誉（市厅级以上） |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 曾讲授课程及评价 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 所获教学、科研奖项名称 | | | | | | | | 获奖时间 | | | | | | | 获奖等级及授予单位 | | | | | | 本人署名排序 | | | | | | | |
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| 所获教学、科研项目名称 | | | 项目来源 | | | | | | | | | 起讫时间/是否结项 | | | | | | 本人角色（承担者/参与排名） | | | | | | 科研经费（万） | | | | |
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| 主要论文、著作名称 | | | 出版时间 | | | | | | | | | 出版社或  期刊名称 | | | | | | 本人署名排序 | | | | | | 备注SCI、EI | | | | |
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| 获批专利情况（发明/实用新型专利） | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 本人排名 | | | 专利名称 | | | | | | | | | 专利类别 | | | | | | 申请号 | | 授权号 | | | | | | | | 授权时间 |
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| 获批软件著作权情况 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 本人排名 | | | 软件著作权名称 | | | | | | | | | 版本号 | | | | | | 登记号 | | | | | 登记日期 | | | | | |
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| 家庭情况 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 配偶姓名 |  | | | | 出生年月 | | | | | | |  | | | | | 性别 | |  | | | | | | 国籍 | |  | |
| 籍贯 |  | | | | 健康状况 | | | | | | |  | | | | | 民族 | |  | | | | | | 政治  面貌 | |  | |
| 现专业技术  职务及取得时间 |  | | | | 本人身份（国家干部/聘用制干部/工人/学生） | | | | | | |  | | | | | | 在现工作单位是否为事业编制 | | | | | | | |  | | |
| 最高学历（学位） |  | | | | 最高学历毕业院校 | | | | | | |  | | | | | | 最高学历所学专业 | | | | | | | |  | | |
| 现工作  单位 |  | | | | | | | | | | | 现行政职务 | | | | | |  | | | | | | | | | | |
| 手机号码 |  | | | | | | | | | | | 人事档案所在单位 | | | | | | |  | | | | | | | | | |
| 是否需要解决配偶工作 □不需要解决 □需要学校解决 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 子女姓名 | 性别 | | | | | | 年龄 | | | | | 单位/就读学校 | | | | | | | | | | | | | | | | |
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| 本人承诺对以上所填内容的真实性负责。  ：（签名）  年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |