**附件2**

**长春新区2018年引进“优秀教师”报名表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 姓名 |  | | | | | | | 性别 | |  | | | | | 出生年月 | | | | |  | | | | | | 小二寸近期  标准红底照片 | | | |
| 政治面貌 | | | |  | | | | 民族 | |  | | | | | 职称 | | |  | | | | | | | |
| 原始学历 | | | |  | | | | 学位 | |  | | | | | 专业 | | | | |  | | | | | |
| 毕业院校 | | | |  | | | | | | | | | | 毕业时间 | | | | | |  | | | | | |
| 最后学历 | | | | |  | | 学位 | |  | | | | 专业 | | | |  | | | | 普通话水平 | | | | | | | |  |
| 毕业院校 | | |  | | | | | | | | | | 毕业时间 | | | | | | |  | | | | 特长 | | | | |  |
| 家庭住址 | | |  | | | | | | | | | 邮政编码 | | | | | | |  | | | | 荣誉称号 | | | | |  | |
| 身份证号 | | |  | | | | | | 固定电话 | | | | | | |  | | | | 手机 | | | | |  | | | | |
| 现工作单位 | | | | | |  | | | | | 职务 | | | | |  | | | | | | 任教学科 | | | | | | |  |
| 申报学校 | |  | | | | | | | | | 申报岗位 | | | | | | |  | | | | 是否同意调剂 | | | | |  | | |
| 学习工作经历  （从第一学历开始） |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 获得荣誉 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 本人承诺 | 本报名表所填写的信息准确无误，所提交的证件、资料和照片真实有效，若有虚假，所产生的一切后果由本人承担。  报名人（签名）： 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 审核意见 | 审查人（签名）：  复核人（签名）： 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

注：此表除审核意见由负责资格审查的工作人员填写外，其它项目均由报考者填写，填写时使用正楷或打字，由招聘组织单位存档备查。