港口区消防救援大队专职消防员报名登记表

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| 姓名 |  | | | 性别 | |  | | 出生年月 | |  | | |  |
| 身份证号 |  | | | | | | | | | | | |
| 民族 |  | | | 籍贯 | |  | | 宗教信仰 | |  | | |
| 婚姻状况 |  | | | 文化程度 | |  | | 联系电话 | |  | | | |
| 政治面貌 |  | | | 党/团时间 | |  | | 健康状况 | | 健康 | | | |
| 常住地址 |  | | | | | | | | | | | | |
| 户籍地址 |  | | | | | | | | | | | | |
| 教育经历（高中/中专起） | | | | | | | | | | | | | |
| 起止时间 | | | 学校名称/培训机构 | | | | 专业 | | | | 获得证书 | | |
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| 工作经历 | | | | | | | | | | | | | |
| 起止时间 | | | 工作单位名称 | | | | | | | | 部门及职务 | | |
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| 家庭成员 | | | | | | | | | | | | | |
| 姓名 | | 关系 | | | 工作单位 | | | | 职务 | | | 联系电话 | |
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