附件1

台州市椒江区银龄讲学支援教师申请表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 | | |  | | | | | 性 别 | | |  | | | 出生  年月 |  | | | | | 一寸彩照 |
| 民 族 | | |  | | 政治  面貌 | | |  | | | 健康  状况 | | |  | 籍贯 | | |  | |
| 身份证号码 | | |  | | | | | | | | | | | | 参加工作时间 | | |  | |
| 教师资格证书类别 | | |  | | | 任教学科 | |  | | | | | | 职称 |  | | | | | |
| 最高学历  毕业院校 | | |  | | | | | | | | | | | | 所学专业 | | | |  | |
| 退休前任教学校 | | |  | | | | | | | | | | | | 职务  （选填） | | | |  | |
| 联系  地址及邮编 | | |  | | | | | | | | | | | | 固定电话 | | | |  | |
| 移动电话 | | | |  | |
| 拟申报岗位 | | | 椒江区公办学校 \*学\*\*岗位 | | | | | | | | | | | | | | | | | |
| 工作简历（包含在职期间和退休后） | | |  | | | | | | | | | | | | | | | | | |
| 所获主要荣誉及奖励（县区级及以上） | | |  | | | | | | | | | | | | | | | | | |
| **本人承诺：上述填写内容和提供的相关依据真实。如有不实，弄虚作假，本人自愿放弃招募资格并承担相应责任。**  **报名承诺人（签名）： 年 月 日** | | | | | | | | | | | | | | | | | | | | |
| 备注 |  | | | | | | | | | | | | | | | | | | | |
|  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  | |  |  |

**注意：以上表格内容必须填写齐全。**