附件：

阳春市档案馆红色革命遗址讲解员报名表

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| 姓  名 |  | | | 性  别 |  | | | 民  族 | |  | | 照  片 |
| 出生年月 |  | | | 政治面貌 |  | | | 籍  贯 | |  | |
| 婚姻状况 |  | | | | 健康状况 | | |  | | | |
| 毕业院校 |  | | | | 专  业 | | |  | | | |
| 学历学位 |  | | | | | 普通话水平 | | | | |  | |
| 掌握何种外语  及程度 | | |  | | | | 计算机掌握程度 | | | |  | |
| 工作单位 | | |  | | | | | | | | | |
| 通讯地址 | | |  | | | | | | | | | |
| 身份证号码 | | |  | | | | 联系电话 | | | |  | |
| 主要学习  及  工作经历 | | 年  月至  年  月 | | | | | | | 在何学校或单位学习或工作 | | | |
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| 奖惩情况 |  | | | |
| 家庭主  要成员 | 姓  名 | 与本人关系 | 年 龄 | 工作单位及职务 |
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| 本人承诺：以上所填内容真实可靠，如不属实，愿承担一切责任。                      签名：                     年     月     日 | | | | |
| 审核意见 | 审核人签名：                   （审核单位盖章）                                   年    月    日 | | | |