**个 人 简 历**

应聘岗位： 填表日期： 年 月 日

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| **基本情况** | | | | | | | | | | | |
| 姓 名 |  | | 性 别 |  | | 出 生  年月日 |  | | |  | |
| 籍 贯 |  | | 民 族 |  | | 政治面貌 |  | | |
| 最高学历 |  | | 最高学位 |  | | 所学专业 |  | | |
| 专业技术职称 |  | | 定职时间 |  | | 现任职务 |  | | |
| 联系电话 |  | | | E-mail | |  | | | |
| 外语语种及程度 | |  | | | | | | | | | |
| 在医院、学校承担的其他工作 | |  | | | | | | | | | |
| 社会学术兼职情况 | |  | | | | | | | | | |
| 其他获奖等情况 | |  | | | | | | | | | |
| 证书获得情况 | | □医师执业证 □规范化培训证书 □职称证书情况\_\_\_\_\_\_\_\_\_\_\_\_\_\_  其他证书\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
| **教育背景** | | | | | | | | | | | |
| **何年何月起**  **至何年何月** | | **学校** | | | **专业及专业方向** | | | **学历/学位** | **教育形式(全日制/自考/函授/电大）** | | **毕业/肄业** |
| 年 月- 年 月 | |  | | |  | | |  |  | |  |
| 年 月- 年 月 | |  | | |  | | |  |  | |  |
| 年 月- 年 月 | |  | | |  | | |  |  | |  |
| 年 月- 年 月 | |  | | |  | | |  |  | |  |

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| **工作、规培、进修、经历** | | | | | | | | | | | | | |
| **时间** | | **单位/机构** | | | **工作/规培/进修** | | | **专业方向** | | | **职称、职务/取证** | | |
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| **学术水平** | | | | | | | | | | | | | |
| **（一）发表论文** | | | | | | | | | | | | | |
| **编号** | **题名** | | | **期刊名称，年，卷（期）：页码** | | | | | | **期刊类别** | | | **作者排名** |
| **1** |  | | |  | | | | | |  | | |  |
| **2** |  | | |  | | | | | |  | | |  |
| **3** |  | | |  | | | | | |  | | |  |
| **4** |  | | |  | | | | | |  | | |  |
| **（二）承担的课题** | | | | | | | | | | | | | |
| **序号** | **项目下达编号** | | **项目、课题名称** | | | **项 目**  **来 源** | **项 目**  **起止时间** | | **科研经费**  **（万元）** | | | **是否结题/获奖** | **本人排名** |
| **1** |  | |  | | |  |  | |  | | |  |  |
| **2** |  | |  | | |  |  | |  | | |  |  |
| **3** |  | |  | | |  |  | |  | | |  |  |
| **4** |  | |  | | |  |  | |  | | |  |  |
| **其他** | | | | | | | | | | | | | |
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| **本人承诺** | | | **所填信息均属实，如有虚假，本人愿意承担一切后果和责任。** | | | | | | | | | | |