**臺中市沙鹿區公所職務代理人甄選報名表**

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| 姓　名 |  | | | | | | 英文姓名  (姓氏在前) | | | |  | | | | | | 性別 | |  | | | | | 請  附  照  片 | | | | |
| 身分證統　編 |  | | | | | | 出生日期 | | | | 年 月 日 | | | | | | | | | | | | |
| 護　照  號　碼 |  | | | | | | 外國國籍(無外國籍者，**請註明「無」**) | | | |  | | | | | | | | | | | | |
| 通訊處 | 戶籍地 | | |  | | | | | | | | | | | | | | | | | | | | **電話號碼** | **公 -**  **宅 -**  **手機 -** | | | |
| 現居住所 | | |  | | | | | | | | | | | | | | | | | | | |
| email | | |  | | | | | | | | | | | | | | | | | | | |
| **學 歷** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 學校名稱 | | | 院(科)系所 | | | | | 修業年限 | | | | | | | | 畢業 | | 結  業 | | 肄業 | 教育程度(學位) | | | | | | 證書日期文號 | |
| 起(年、月) | | | | | 迄(年、月) | | |
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| **工 作 經 歷** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 服務機關(構) | | | | | | 職稱 | | | | | | 服務期間 | | | | | | | | | | | 服務證明書名稱 | | | | | |
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| **外 國 語 文** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 語文類別 | | | | | | 分數／等級 | | | | | | 證書字號 | | | | | | | | | | | | | | 備註 | | |
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| **專 長** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 專長項目 | | 證照名稱 | | | 生效日期 | | | | | | | | | | 證件日期文號 | | | | | | | 認證機關 | | | | | | 專長描述 |
| 年 | | | | 月 | | | 日 | | |
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| **自 傳** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 繳交證件：( )國民身分證影本( )學經歷及相關證照影本( )身心障礙者手冊影本  ( )原住民身分證件 ( ) 其他（請敘明） | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 聲明事項：  茲聲明本人確無「公務人員任用法」第二十六條第一項之禁止情事：  即本人與貴機關首長並無三親等以內血親、姻親之關係，且與用人單位主管並無三親等以內血親、姻親。  若有違反上開規定，或有不實情事者，願無條件解僱，且負法律及相關責任，特立具結書為證。報名者： | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **資格審查：□合格 □不合格 審核人簽章：** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

註：本表如不敷使用，請自行延長。