附件2

**2021年沪黔“银智红情”志愿者报名表**

NO.

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 |  | | | | 出生年月 | | |  | | | |  |
| 性别 |  | | | | 政治面貌 | | |  | | | |
| 职称 |  | | | | 专 长 | | |  | | | |
| 身份证号码 | | |  | | | | | | | 民族 | |  |
| 手机号码 | | |  | | | | | 家庭电话 | |  | | |
| 家庭地址 | | |  | | | | | | | 邮编 | |  |
| 原工作单位 | | |  | | | | | | | 电话 | |  |
| 地址 | |  | | | | | | | | 邮编 | |  |
| 援助岗位意向 | | | |  | | | 可援助时间 | | | |  | |
| 家 庭  成 员 | | 姓名 | | | | 关系 | | | 联系电话 | | | |
|  | | | |  | | |  | | | |
|  | | | |  | | |  | | | |
| 本 人 简 历 | |  | | | | | | | | | | |
| 为 何 参 加 | |  | | | | | | | | | | |

本人承诺以上所填信息属实，志愿者： 日期： 。