湖南医药学院公开招聘考生健康监测卡

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 |  | | | 性别 | | |  | | 报考岗位代码 | | | | | |  | | | | | | |
| 住址 |  | | | | | | | | | | | | | | | | | | | | |
| 考前近14天停留区域  （指怀化市域以外地区） | | | | | |  | | | | | | 前往  时间 | | |  | | | 返回  时间 | | |  |
| 是否确诊病例 | | | |  | | | | 是否疑似病例 | | | |  |  | | 是否接触过确诊或疑似病例 | | | |  | | |
| 来我校乘坐交通工具 | | | | 航班  （航班号） | | | |  | | | | |  | | 汽车  （起止地） | | | |  | | |
| 火车/高铁  （车次） | | | |  | | | | |  | | 其他 | | | |  | | |
| 7月1日起至现场资格审查当日的 体温 检测 记载 | 日期 | |  | |  | | | | | |  | | |  | | |  | | |  | |
| 体温 | |  | |  | | | | | |  | | |  | | |  | | |  | |
| 日期 | |  | |  | | | | | |  | | |  | | |  | | |  | |
| 体温 | |  | |  | | | | | |  | | |  | | |  | | |  | |
| 日期 | |  | |  | | | | | |  | | |  | | |  | | |  | |
| 体温 | |  | |  | | | | | |  | | |  | | |  | | |  | |
| 家庭常住成员中是否有确诊或疑似病例 | | | | | | | | | | | | | | | |  | | | | | |
| 承诺书∶本人保证以上填写内容属实。  本人签名∶  2022年 月 日 | | | | | | | | | | | | | | | | | | | | | |
| 交表时间 | | 2022年 月 日 | | | | | | | | 部门查验人签名∶ | | | | | | | | | | | |

注∶1.考生须如实填写，在现场资格审查时由各审核部门单位查验签字盖章后统一交学校组织人事部人事科备案;2. 此卡仅限用于疫情防控，人员信息须严格保密，不得对外公开或泄露。