附件5

平顶山市第二人民医院

2020年公开招聘人事代理人员疫情防控监测登记表

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| --- | --- | --- | --- | --- | --- | --- |
| 日期 | 所在地 | 上午 | | 下午 | | 本人签字 |
| 体温 | 健康状况 | 体温 | 健康状况 |
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注：1.此表由考生本人亲笔填写，并对填写内容要真实、准确负责。

2.填写日期需具体到“日”，所在地需具体到县（区），如“平顶山市新华区”。