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新生入学政审表

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 照  片  （竖版2寸） | | 姓 名 |  | | | | | | | | 性 别 | | | | | |  | | | | | | |
| 文化程度 |  | | | | | | | | 民 族 | | | | | |  | | | | | | |
| 出生日期 |  | | | | | | | | 政治面貌 | | | | | |  | | | | | | |
| 家庭住址 |  | | | | | | | | | | | | | | | | | | | | |
| 身份证号 |  |  |  |  |  |  | |  | |  |  |  |  |  | |  |  |  |  |  |  |
| **以上内容如实填写** | | | | | | | | | | | | | | | | | | | | | | | |
| 背景调查信息 | 是否受过行政拘留（含）以上处罚 | | | | | | | | □ 是 □ 否 | | | | | | | | | | | | | | |
| 是否有未了结的刑事诉讼 | | | | | | | | □ 是 □ 否 | | | | | | | | | | | | | | |
| 是否有吸毒、赌博等违法行为 | | | | | | | | □ 是 □ 否 | | | | | | | | | | | | | | |
| 是否参加过非法组织 | | | | | | | | □ 是 □ 否 | | | | | | | | | | | | | | |
| 直系亲属等是否受过刑事处罚 | | | | | | | | □ 是 □ 否 | | | | | | | | | | | | | | |
| 是否有精神病史、传染病史、遗传病史等 | | | | | | | | □ 是 □ 否 | | | | | | | | | | | | | | |
| 审查人员签字：    （印章）  年 月 日 | | | | | | | | | | | | | | | | | | | | | | |
| 其他需说明的问题： | | | | | | | | | | | | | | | | | | | | | | |