

**Institute of Mountain Hazards and Environment, CAS**

**Position Application Form**

Employer: Institute of Mountain Hazards and Environment, CAS

Research Field:

Talent Category:

Name:

Tel.:

E-mail:

Date:

**Instructions**

**I. Please complete the application form truthfully, and the relevant information filled in shall not contain confidential information, and the applicant shall duly sign the form.**

**II. Supporting documents**

**1. Evaluation comments from third parties:** in principle, three letters of recommendation from experts in the field as a minimum, including comparative evaluations. The recommending experts shall send the letter of recommendation via their e-mail to the Human Resources & Education Division of the Institute of Mountain Hazards and Environment, CAS: rencai@imde.ac.cn.

**2. Proof of work experiences and identity**

(1) Proof of employment/work experiences and identity.

(2) Photocopy of certificate of the highest academic degree.

**3**. **The supporting documents shall be scanned in PDF format and e-mailed to the Human Resources & Education Division of the Institute of Mountain Hazards and Environment, CAS.**

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| **Intended Position** | | | | **Director** | | | | | | **Application Department** | | | | | | | | **State Key Laboratory of Mountain Hazards and Engineering Safety, CAS** | | | | | | | | | | | | | | | |
| **Personal Information** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name |  | | | | | | Gender | | | | | |  | | | | Date of birth | | | | | | |  | | | | | | | photo | | |
| Nationality |  | | | | | | Ethnic group | | | | | |  | | | | Marital status | | | | | | |  | | | | | | |
| Politics status |  | | | | | | Time of joining the political party | | | | | |  | | | | Birthplace | | | | | | |  | | | | | | |
| Height |  | | | | | | Weight | | | | | |  | | | | Past medical history | | | | | | |  | | | | | | |
| Highest academic degree |  | | | | | | Major | | | | | |  | | | | Employment date | | | | | | |  | | | | | | |
| E-mail |  | | | | | | Mobile No. | | | | | |  | | | | ID No. | | | | | | |  | | | | | | | | | |
| Current residence address |  | | | | | | | | | | | | | | | | Household registration location | | | | | | |  | | | | | | | | | |
| Current monthly salary (before tax) | | | | |  | | | | | | | | | | | | Expected salary  (before tax) | | | | | | |  | | | | | | | | | |
| Types of Talent Program granted | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please specify if you have any relatives working or studying at the Institute. | | | | | | □No; □Yes 【 】 | | | | | | | | | | | | | | | Emergency contact person and telephone number | | | | | | | | |  | | | |
| **Highest Education/Academic Degree** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Awarding Agency of the highest academic degree | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Thesis title for the highest academic degree | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Major of the highest academic degree | | | | | |  | | | | | | | | Country where you are granted the highest academic degree | | | | | | | | | | | | |  | | | | | | |
| Name of Supervisor (title) | | | | | |  | | | | | | | | Award date of the highest academic degree | | | | | | | | | | | | |  | | | | | | |
| **Educational Background** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Education level | | | Starting and ending date | | | | | College, department, and tutor  (Please indicate the supervisor's name if you have a master's degree and above) | | | | | | | | | | | | Major | | | | | | | | Full-time/Part-time | | | | | Location |
| High school | | |  | | | | |  | | | | | | | | | | | |  | | | | | | | |  | | | | |  |
| Undergraduate | | |  | | | | |  | | | | | | | | | | | |  | | | | | | | |  | | | | |  |
| Master | | |  | | | | |  | | | | | | | | | | | |  | | | | | | | |  | | | | |  |
| PhD | | |  | | | | |  | | | | | | | | | | | |  | | | | | | | |  | | | | |  |
| **Work Experiences** (in reverse chronological order) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Starting and ending date | | | | | | Employer(Institution), location and country | | | | | | | | | | | | | | | | | | | Title and designation | | | | | | | | |
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| **Please state the reasons if your study or work experience is not consecutive:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Family Members** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mainly including parents, spouse, children, brothers and sisters and other people most important in your life. | | Relation | | | | | Name | | | | Age | | | | | Employer(Institution) | | | | | | Position | | | | | | | Current residence address | | | | |
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| **Other Information** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Whether you plan to apply for a Chengdu household registration | | | | | | □Yes □No | | | | | | File location | | | | | | | | | | |  | | | | | | | | | | |
| Do you have any disciplinary or disciplinary records? | | | | | | □Yes □No | | | | | | Are you detained, arrested, or charged for a violation of law? | | | | | | | | | | | □Yes □No | | | | | | | | | | |
| Did you be involved in any legal dispute? | | | | | | □Yes □No | | | | | | Do you have any history of mental illness or psychotic depression? | | | | | | | | | | | □Yes □No | | | | | | | | | | |
| **Job Information Source** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ○ 51job ○ Zhilian Zhaopin ○ Website of college/university ○ Job fairs ○ Events of college/university/conferences, etc.  ○ Recommended by CAS staff (**Referrer**: ) ○ Others: ( ) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Do you be involved in any intellectual property disputes, trade secret infringement, non-competition, confidentiality agreements, part-time pay, etc.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Please specify if any:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Self-assessment of Potential Risks** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Risk factors** | | | | | | | | | **Risk level** | | | | | | | | | | | | | | | | | | | | | | | **Remarks** | |
| **None** | | | | | | **Low** | | | | **Medium** | | | | | | | **High** | | | | | |
| Is there an assignment or license of rights as a patentee/inventor? Is there an exclusive or exclusionary permit? Has the permit expired? | | | | | | | | |  | | | | | |  | | | |  | | | | | | |  | | | | | |  | |
| Is there any IP infringement of prior rights of others, such as patents/trademarks for the main techniques? | | | | | | | | |  | | | | | |  | | | |  | | | | | | |  | | | | | |  | |
| Is there a dispute of interest as a copyright owner? | | | | | | | | |  | | | | | |  | | | |  | | | | | | |  | | | | | |  | |
| Are external patents or software involved in the data analysis method used? | | | | | | | | |  | | | | | |  | | | |  | | | | | | |  | | | | | |  | |
| Note: If there is no risk as listed, please fill in the corresponding risk level as "None". Otherwise, please give further explanations in the Remarks. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Commitment** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. I hereby undertake that this form is completed by me personally and that all information provided herein is authentic, correct and valid. I understand and agree that I shall bear the responsibility for any intentional misrepresentation of information, deception or other inaccuracies, including immediate dismissal without compensation, even if I have been hired.  2. I understand and agree to the following arrangements:  All information provided herein may be used for all purposes related to my employment.  During the selection and employment period of the Institute, the Institute may contact my previous/current organization and references without prior notice.  3. If the contact information provided herein changes after the employment contract is signed, I will timely notify the Human Resources & Education Division; otherwise, the above contact information will always be valid.  **Signed by the Applicant:**  Date: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

***Annex 1: Overview of Scientific and Technological Achievements***

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| **Major Academic Achievements, Scientific and Technological Achievements and Innovation Points** |
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***Annex 2: Scientific and Technological Achievements***

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| **Scientific and Technological Papers Published** | | | | | | | | |
| Author's Information  ("\*" for corresponding author) | Title | | | Journal | | Year | | Page |
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| **Monographs published** | | | | | | | | |
| **Author's Information** | **Name of the monograph** | | **Publisher** | | **Publication date** | | **Word counts and the one completed by the applicant as the author** | |
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| **Patents published** | | | | | | | | |
| **Author's Information** | **Patent title** | | **Patent acceptance (licensing) time** | **Patent acceptance (licensing) No.** | | | | |
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| **Provincial and Ministerial Awards for Science and Technology Achievements** | | | | | | | | |
| **Award source** | | **Award level** | **Program name** | **Individual ranking** | | | | |
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***Annex 3: Programs Undertaken and Participated***

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| **Program Information** | | | | |
| **Program name** | **Program source** | **Start and end time** | **Program funding**  **(CNY ten thousand)** | **Duties of the Applicant**  **(Program facilitator, subject leader, participator)** |
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***Annex 4: Work Plan***

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| **Proposed Research Works** |
| [The following outline is for reference only, and the page can be expanded]  1. Program name  2. Basis of the program approval  3. Research contents, objectives, and the key issues to be solved  4.The proposed research program and feasibility analysis  5. Expected achievements:  6. Conditions required:  (including research funds, instruments and equipment, personnel, etc., and a brief description of the need for the conditions required and the budgetary basis) |
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*Tips: Please scan the relevant supporting documents and send them as a combined PDF as an attachment.*