**附件1**

**桐庐县卫生健康局公开招聘编外人员计划表**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **岗位名称** | **招聘****人数** | **性别** | **户籍 要求** | **年龄** | **学历学位****要求** | **专业要求** | **备注** |
| 1 | 办公室工作人员 | 1 | 不限 | 浙江桐庐 | 18-35周岁 | 大专及以上学历学位不限 | 不限 |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |