附件1

浙江省高校毕业生求职创业补贴申请表

学校（院系）： 学号：

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 学生基本情况 | 姓 名 |  | | | | | | 性别 | | |  | | | | | 民族 | |  | | | | | | 彩色一寸  免冠照片 | | | |
| 出生年月 |  | | | | | | | | | 学 历 | | | | |  | | | | | | | |
| 身份证号 |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  |  | |  | |  |
| 生 源 地 |  | | | | | | | | | 专 业 | | | | |  | | | | | | | |
| 移动电话 |  | | | | | | | | | QQ | | | | |  | | | | | | | |
| 电子邮箱 |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| 银行账号 |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  | |  |  | |  |  |  |  |  |
| 开户行 |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| 就业去向 |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| 困难类型 | □城乡低保家庭 □残疾人 □孤儿 □在学期间获得国家助学贷款  □建档立卡贫困家庭 □贫困残疾人家庭 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 是否通过社会救助信息管理系统、残疾人信息库核对；是否在高校提供的贷款名单中 | | | | | | | | | | | | | | | | | | | | | □是 □否 | | | | | |
| 学生申请 | 本人申请领取求职创业补贴，申报情况属实，请予批准。  申请人（签字）： 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 学校意见 | 该生填报情况属实，经公示无异议，同意上报。  学校公章  年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 职能部门联审 | 人力资源社会保障部门意见  盖 章  年 月 日 | | | | | | | | | | | | 财政部门意见  盖 章  年 月 日 | | | | | | | | | | | | | | |

备注：证明材料附后