附件3

河口区就业困难人员申请认定登记表

**编号:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 就业困难人员申请认定类别 | | | | | | | 1、“4050”失业人员；2、城乡双零就业家庭成员中的失业人员；3、抚养未成年子女单亲家庭中的失业人员；4、享受最低生活保障的失业人员；5、残疾失业人员；6、连续失业一年以上的失业人员；7、失地失业人员；8、随军随调家属；9、刑释解教人员；10、毕业半年后仍未实现初次就业的高校毕业生。 （在申请认定项中打∨） | | | | | | | | | | | | | | | | | | |
| 姓名 |  | | | | | | 性别 | | | | | |  | 出生日期 | | | |  | | | | | | 照  片 | |
| 身份证号码 | | | |  | | | | | | | | | | 文化程度 | | | |  | | | | | |
| 家庭住址 | | | |  | | | | | | | | | | 联系电话 | | | |  | | | | | |
| 就业困难人员信息 | | | 登记失业时间 | | | | | |  | | | | | 就业失业登记证编号 | | | | | | | |  | | | |
| 属低保失业人员 | | | | | | 属残疾失业人员 | | | | | 属抚养未成年子女单亲家庭失业人员 | | | | | | | 需培训专业 | | | | 择业意向 |
| 是否 | | 低保证编号 | | | | 是否 | | | 残疾证编号 | | 是否 | | 离异 | 丧偶 | | | |  | | | |  |
|  | |  | | | |  | | |  | |  | |  |  | | | |  | | | |  |
| 家庭成员情况 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 姓名 | | 与本人关系 | | | | 年  龄 | | 文化程度 | | | 就业情况 | | | | | | | | | 择业意向 | | | | | 需培训专业 |
|  | |  | | | |  | |  | | |  | | | | | | | | |  | | | | |  |
|  | |  | | | |  | |  | | |  | | | | | | | | |  | | | | |  |
| 城乡“零就业家庭”  类型（打勾） | | | | | | | 无1人就业 | | | | | | | | | | | | | | | |  | | |
| 虽有1人就业但不稳定且家庭人均收入低于城乡最低保障的 | | | | | | | | | | | | | | | |  | | |
| 镇街人力资源和社会保障机构意见  年 月 日 | | | | | | | | | | | | | | | 区人力资源和社会保障部门意见  年 月 日 | | | | | | | | | | |
| 提供动态管理援助责任单位 | | | | | | | | | |  | | | | | | | | | | | | | | | |
| 单位负责人姓名 | | | | | | | | | |  | | | | | 联系电话 | | | |  | | | | | | |
| 就业援助情况  援助信息较多，可后附页补充 | | | | | | | | | |  | | | | | | | | | | | | | | | |
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