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| 姓 名 |  | 性 别 |  | 文化程度 |  | 民 族 |  | 照片 |
| 身份证号码 |  | 政治面貌 |  | 身体状况 |  |
| 联系电话 |  | 家庭住址 |  |
| 婚姻状况 |  | 户口所在地 |  | 在本社区居住时间 |  |
| 申报岗位 |  |
| 人员类别 | □城镇大龄失业人员（女性40周岁、男性50周岁以上至法定退休年龄） |
| □城镇零就业家庭人员 □城镇抚养未成年子女的单亲家庭成员 |
| □城镇享受最低生活保障人员 □城镇持有《中华人民共和国残疾人证》人员 |
| □连续失业一年以上的人员 |
| 家庭成员 | 关 系 | 姓 名 | 身份证号码 | 收入情况（元） |
| 经营性 收入 | 固定资产租赁性收入 | 劳动报酬收入 | 其 他收 入 |
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| 个人工作经历 |  |
|  个 人 声 明 |
|  本人承诺，以上信息和提报材料情况属实，自愿服从岗位分配，否则视为放弃公益性岗位安置资格。  |
|  申请人（签字）： |
|  年 月 日 |
| 资格审查意 见 |  （人社所签章） 年 月 日 |

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| 附件：财源街道城镇公益性岗位人员申请报名登记表 |

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