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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 | |  |  | | |  | | |  | |  |  | |  | |  |  | | |  | | |  | |  |  | |  | |  |  | | |  | | |  | |  |  | |  | |  |  | | |  | | |  | |  |  | |  | | 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 | | | | | | | | | | | | | |  |  | | --- | | 附件：  财源街道城镇公益性岗位人员申请报名登记表 | |