表单号：1416088-H2

用人单位吸纳就业社保补贴申请表

填写日期： 年 月 日

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 单位名称（盖章） | |  | | | | | | | | | | | | | 统一社会信用代码 | | | | | |  | | | 联系人 | |  | | 联系电话 | |  |
| 地址 | |  | | | | | | | | | | | | | | | | | | | 开户名 |  | | | | 开户银行 |  | 银行账号 | |  |
| 序 | 姓 名 | 身 份 证 号 码 | | | | | | | | | | | | | | | | | | | 就业登记时间 | 人员类别 | | 学历 | | 毕业时间 | 劳动合同起止日期 | 申请补贴起止日期 | | 申请补贴金额 |
| 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  | |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  | |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  | |  |
| 4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  | |  |
| 5 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  | |  |
| 6 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  | |  |
| 7 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  | |  |
| 8 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  | |  |
| 9 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  | |  |
| 10 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  | |  |
| 合 计 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| **申请补贴信息** | | 吸纳就业困难人员\_\_\_\_\_\_\_\_人 | | | | | | | | | | | 招用高校毕业生\_\_\_\_\_\_\_\_ 人 | | | | | | | | | | 招用其他人员\_\_\_\_\_\_\_人 | | 合计：  申请社保补贴\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_人，  共\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_元 | | | | | |

备注：1.人员类别按①大龄失业人员、②低保失业人员、③被征地人员、④高校毕业生填写。2.非高校毕业生无需填写学历和毕业时间。