附件 

**武汉市2023届大中专毕业生一次性求职创业补贴申请表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 基本信息 | 姓名 |  | | | | | | | | | 性别 | | | | | |  | | | 民族 | | | | |  | | | | | | | 免冠照片 | | | | | |
| 生源地 | 省 市 （县） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 身份证号 |  |  | |  | |  |  | |  | |  | |  | |  | |  |  |  | | |  |  | |  |  | |  |  | |
| 所在院系 |  | | | | | | | | | | | | | | | | 学号 | | |  | | | | | | | | | | |
| 学历 | □  中专（技校） □职业高中 □ 大专  □本科 □  硕士研究生 □ 博士研究生 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 联系信息 | 手机号 |  |  |  | |  |  | |  |  |  | |  | |  | |  | 电子邮箱 | | | | | | |  | | | | | | | | | | | | |
| 家庭住址 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 紧急联系人 |  | | | | | | | | | | | | | | | | 手机号 | | | | | | |  |  | |  |  |  |  | |  |  |  |  |  |
| 申报信息 | 申请对象 类别  （只勾选  1项） | □  .城乡低保家庭毕业生□贫困残疾人家庭毕业生（如享受低保） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 低保家庭户主姓名： | | | | | | | | | | | | | | | | | | | | 身份证号： | | | | | | | | | | | | | | | |
| □ 社会孤儿毕业生 | | | | | | | | | | | | | | | | | | | | □烈属毕业生 | | | | | | | | | | | | | | | |
| □ 残疾人毕业生 | | | | | | | | | | | | | | | | | | | | □ | | 获得国家助学贷款毕业生 | | | | | | | | | | | | | |
| □ 脱贫人口家庭毕业生 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 脱贫家庭户主姓名： | | | | | | | | | | | | | | | | | | | | 身份证号： | | | | | | | | | | | | | | | |
| 账户 信息 | 银行卡号 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 个人 承诺 | 本人正在积极求职（创业）， 且从未在其他院校就读期间享受过一次性求职创业补 贴， 现申请领取武汉市一次性求职创业补贴。 本人承诺所提交的申请资料真实、 完整、 准确， 如有虚假， 本人承担一切法律责任。  年 月 日  申请人签字： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 学校 审核 意见 | 该申请人是我校  届毕业生， 表内所填信息真实 、 完整 、 有效， 符合一次性求 职创业补贴申请条件， 初审合格并公示无异议， 同意申报。  年 月 日  学校（盖章）： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |