附件1

高港区2019年困难职工申请表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 职工姓名 | | |  | | | | | 性别 | |  | | 出生日期 | |  | | | | 工作单位 | |  | | | | | | |
| 身份证号 | | |  | | | | | | | | | 月收入 | |  | | | | 联系电话 | |  | | | | | | |
| 是否党员 | | |  | | 是否低保 | | | |  | | | 健康状况 | | |  | | 残疾类别 | | |  | | 是否进入医保 | | | |  |
| 家庭住址 | | |  | | | | | | | | | | 婚姻状况 | | | |  | | | 住房类型： | | | | | | |
| 所属社区 | | |  | | | | | | | | | | 户口类型 | | | |  | | | 建筑面积： 平米 | | | | | | |
| 是否装有线电视 | | | | | | |  | | | | | 参加工作时间 | | | | |  | | | | 是否劳模 | | |  | | |
| 家庭成员 | 姓 名 | | | 称谓 | | | 政治面貌 | | 身份证号 | | | | | | | 出生  日期 | 健康状况 | | 月收入 | | 工作单位或就读学校 | | | | 是否进入医保 | |
|  | | |  | | |  | |  | | | | | | |  |  | |  | |  | | | |  | |
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| 家庭年总收入 | | | | | |  | | | | | 月人均收入 | | | | |  | | | 申请人签名 | | | |  | | | |
| 单位工会意见 | | （章）  年 月 日 | | | | | | | | | | | | | | 所属园区镇街系统工会意见 | （章）  年 月 日 | | | | | | | | | |
| 区总工会意见 | | （章）  年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | |

注：家庭月总收入包括：各类工资、奖金、津贴、补贴等劳动收入；退休金、失业金、救济金和基本生活费；赡养费、扶养费、抚养费；出租房屋的租金、遗属定期补助金、从事个体经营的营业收入、各种劳务酬金；拆迁补偿金；农村户口的家庭成员从事种植、养殖和农副产品加工的收入以及外出打工的收入。优抚对象的抚恤金和补助金不计入家庭收入。