就业见习人员补贴申请名册

就业见习基地名称（盖章）： 填写日期： 年 月 日

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| 序  号 | 姓名 | 身份证号码 | 户籍地址 | 学历 | 人员类别 | 毕业  时间 | 见习岗位 | 见习协议起止日期 | 实际见习起止日期 | 实际见习月数 | 是否  留用 | 联系电话 | 申请见习基本生活补贴金额  （单位：元） | 申请综合商业保险费补贴  金额  （单位：元） | 申请补缴养老保险费补贴  金额  （单位：元） | 申请指导管理费用补贴金额（单位：元） | 申请其他补贴金额（单位：元） |
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| 合计 | | | | | | | | | | | | |  |  |  |  |  |

**备注：**1.①人员类别填写代码：②离校未就业高校毕业生；③登记失业青年；在校大学生。

2.本表一式一份，由经办机构留存