高校毕业生社保补贴申领（单位吸纳）申请表

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| 单位名称（盖章） |  | | | | | | 申请日期 |  | | | | |
| 地址 |  | | | | | | 统一社会信用代码 |  | | | | |
| 开户名 |  | | 开户行 | | | |  | 账号 | |  | | |
| 联系人 | |  | | | | | 联系电话 |  | | | | |
| 序号 | 姓名 | 身份证号码 | | 学历 | 毕业  时间 | 户籍地址 | | 劳动合同起止日期 | 申请补贴起止日期 | | 是否提前解除劳动合同 | 是否劳务派遣 |
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| 合计 人 | | | | | | | | | | | | |