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| 姓 名 |  | | | | 性 别 | | | | |  | | | | | | 年 龄 | | | | | |  | | | | |
| 户籍性质 | 农业□ 非农业□ 居民户□ | | | | | | | | | 联系电话 | | | | | | 住宅电话 | | | | | |  | | | | |
| 手机号码 | | | | | |  | | | | |
| 登记证编号 |  |  |  |  | |  | |  |  | |  | | |  |  | |  | |  | |  | |  | |  |  |
| 家庭住址 |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| 基本信息变更 | 变更日期 | | | | 变更项目 | | | | | 变更内容 | | | | | | | | | | | | | | | | |
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| 就业登记 | 就业类型 | | | | | | 单位就业□ 自主就业□ | | | | | | | | | | | | | | | | | | | |
| 就业单位名称 | | | | | |  | | | | | | | | | | | | | | | | | | | |
| 签订劳动合同 | | | | | | 是□ 否□ | | | | | | 参加社会保险 | | | | | | | 是□ 否□ | | | | | | |
| 合同履行期限 | | | | | | 年 月 — 年 月 | | | | | | | | | | | | | | | | | | | |
| 自主就业类型 | | | | | | 个体经营□灵活就业□其他□ | | | | | | | | | | | 就业时间 | | | | | |  | | |
| 失业登记 | 登记失业时间 | | | | | |  | | | 享受失业保险待遇 | | | | | | | | | | 是□ 否□ | | | | | | |
| 失业类型 | | | | | | 无就业经历□ 就业转失业□ 其他□ | | | | | | | | | | | | | | | | | | | |
| 失业前单位名称 | | | | | |  | | | | | | | | | | | | | | | | | | | |
| 技能特长 | | | | | |  | | | | | 培训需求 | | | | | | | |  | | | | | | |
| 就业意向 | | | | | |  | | | | | 薪酬要求 | | | | | | | |  | | | | | | |
| 拟接受公共就业人才服务内容 | | | | | | 职业介绍□ 职业指导□ 创业服务□ 职业培训□ 其他服务□ 档案托管□ 劳动（人才）事务代理□ 其他□ | | | | | | | | | | | | | | | | | | | |
| 提供材料目录 | 劳动合同□ 解除劳动关系证明□ 毕业证书（明）□ 参保缴费证明□ 工商营业执照（组织起来就业证书）□ 失地（林）证明□ 灵活就业证明□ 其他证明□： | | | | | | | | | | | | | | | | | | | | | | | | | |
| 申请人签名： | 以上资料由本人填写，情况真实，并自愿接受公共就业人才服务机构提供的就业服务。  签名： 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 以下由公共就业人才服务机构填写 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 登记失业类型 | 1 □ 2 □ 3 □ 4 □ 5 □ 6 □  7 □ ①进城务工人员（含非本省户籍人员）□ ②其他□ | | | | | | | | | | | | | | | | | | | | | | | | | |
| 享受失业保险待遇期限 | 自 年 月起至 年 月止 | | | | | | | | | | | | | | | | | | | | | | | | | |
| 初审意见：  （签名）：  年 月 日  （盖章） | | | | | 审核意见：  （签名）：  年 月 日  （盖章） | | | | | | | | | | | 审批意见：  （签名）：  年 月 日  （盖章） | | | | | | | | | | |

**就业失业登记表**

说明：登记失业类型：1、从学校毕业或肄业；2、从用人单位失业；3、个体业主停止经营；4、失地、失林劳动者；5、退役且未纳入统一安置；6、刑满释放、假释、监外执行或解教；7、其他人员：①进城务工人员（含非本省户籍人员）在常住地稳定就业满6个月后失业；②其他失业人员

**失业人员登记审核表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 | |  | 身份证号 | |  | | | | | | | | | | | |  | |
| 性别 | | □男 □女 | 出生年月 | |  | | | | | | | | | | | |
| 民族 | |  | 文化程度 | |  | | | | 政治面貌 | | | | |  | | |
| 参加工作时间 | |  | 用工形式 | | □城镇职工、□农民合同制 | | | | | | | | | | | |
| 工作单位 | |  | | | | | 兵役状况 | | | □干部（职务： ）□士兵 | | | | | | | | |
| 单位性质 | | □企业（□国有 □集体 □股份制 □外资 □私营） □事业 □社团 □个体 □其他 | | | | | | | | | | | | | | | | |
| 失业时间 | |  | 失业原因 | | | □合同终止 □解除合同 □其他 | | | | | | | | | | | | |
| 家庭住址 | | 市（县） 区（乡） 路（街）号 | | | | | | | | | | | | | | | | |
| 办事处 | |  | 社区/居委会 | | | |  | | | | | 电话 | | | |  | | |
| 主  要  简  历 | 起止时间 | | 单位名称 | | | | | | | | | | 专业/职称 | | | | | |
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|  | |  | | | | | | | | | |  | | | | | |
| 家  庭  成  员 | 姓名 | | 工作单位 | | | | | | | | | | 与本人关系 | | | | | |
|  | |  | | | | | | | | | |  | | | | | |
|  | |  | | | | | | | | | |  | | | | | |
|  | |  | | | | | | | | | |  | | | | | |
| 申请人签名 | | | 年 月 日 | | | | | | | | | | | | | | | |
| 用人单位意见：  经办人：  年 月 日  （盖 章） | | | 失业保险经办机构意见： | | | | | | | | | | | | | | | |
| 视同缴费年限 | 年 月 | | | | 实际缴费年限 | | | 年 月 | | | | 合计 | | |  |
| 同意登记。依据《郑州市失业保险条例》的规定，经审核，同意按当地月最低工资的80%领取失业保险金 ，月失业保险  金 元，医疗补助金 元，共计享受 拾  个月，登记当月到 区（县、市）失业保险经办机构报到，下月领取。  经办人：  审核人：  年 月 日  （盖 章） | | | | | | | | | | | | | | | |

注：1、本表一式两份，经办机构、个人档案各一份。

2、“□”为选项，只需框内打“√”

**《就业失业登记证》申领表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 姓 名 |  | | | | | | | | | | 性 别 | | | | | | | |  | | | | | | | | | 2  寸  免  冠  照  片 | | | | | | | |
| 出生日期 | 年 月 日 | | | | | | | | | | 民 族 | | | | | | | |  | | | | | | | | |
| 文化程度 |  | | | | | | | | | | 政治面貌 | | | | | | | |  | | | | | | | | |
| 联系电话 |  | | | | | | | | | | 婚姻状况 | | | | | | | |  | | | | | | | | |
| 户籍地址 |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 户籍性质 | 农业□ 非农业□ 居民户口□ | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 常住地址 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 原证件号码 | 优惠证号： 就失业证号： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 身份证号码 |  |  | |  | |  | | |  | | |  | |  | |  | |  |  |  | | |  | |  | |  | |  | |  | |  | |  |
| 学历情况 | 毕业时间 | | | | | | | 毕业于何校何专业 | | | | | | | | | | | | | | | | | | | | | 学历 | | | | | | |
|  | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
|  | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
| 职业资格专业技术职务 | 取得时间 | | | | | | | 职业资格、专业技术职务名称及等级 | | | | | | | | | | | | | | | | | | | | | 备注 | | | | | | |
|  | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
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| 已享受就业扶持政策内容及期限 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 提供材料目录 | 身份证□ 户口薄□ 毕业证书（明）□ 职业资格（专业技术）证书□ 照片□ 其他□： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 申请人签名： | 以上资料由本人填写，情况真实。  签名： 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 以下由公共就业人才服务机构填写 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 领证人员类型 | 城镇户籍的劳动者□ 进城求职的农村劳动者□  毕业年度高校毕业生□ 其他□ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 证件编号 |  | |  | |  | |  | | |  | | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |  | |
| 初审意见：  （签名）：  年 月 日  （盖章） | | | | | | 审核意见：  （签名）：  年 月 日  （盖章） | | | | | | | | | | | | | | | | 审批意见：  （签名）：  年 月 日  （盖章） | | | | | | | | | | | | | |