附件：

**平顶山学院金秋助学教职工档案表格**

平顶山学院教职工所在分工会签章：填报日期：年月日

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 职工所在部门 | | |  | | | | | | | | | | | | | | 家庭住址 | | | |  | | | | | | | | 困难类别 |  |
| 姓名 | | | 性别 | | | 民族 | | | | 政治面貌 | | | 出生年月 | | | | 身份证号 | | | | | | | | 健康状况 | | | 残疾类别 | | 工作状态 |
|  | | |  | | |  | | | |  | | |  | | | |  | | | | | | | |  | | |  | |  |
| 住房类型 | | | 建筑面积 | | | | | | 手机号码 | | | | | | | 其他联系方式 | | | | | | | | | 邮政编码 | | | 婚姻状况 | | 参加工作时间 |
|  | | |  | | | | | |  | | | | | | |  | | | | | | | | |  | | |  | |  |
| 本人月平均收入（元） | | | | | 家庭成员月平均收入 | | | | | | | 家庭其他非薪资年收入 | | | | | | | | 家庭年度总收入 | | | | | 家庭人口 | | | 家庭月人均收入 | | 医保现状 |
|  | | | | |  | | | | | | |  | | | | | | | |  | | | | |  | | |  | |  |
| 是否为零就业家庭 | | | | | | | | | |  | | 是否有一定自救能力 | | | | | | | | | | |  | 是否单亲 | | |  | | 是否劳模 |  |
| 家庭成员关系(仅限直系亲属：配偶、父母及子女) | | 姓名 | | 关系 | | | | 性别 | | | 政治面貌 | | | | 出生年月 | | | | 身份证号 | | | | | | 健康状况 | 月收入 | | | 医保状况 | 单位或学校 |
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| 主要致困原因 | | | | | | |  | | | | | | | | | | | | 次要致困原因（0—3项） | | | | |  | | | | | | |
| 附件  名称 |  | | | | | | | | | | | | | | | | | 需要说明的其他情况 | | | |  | | | | | | | | |
| 校工会负责人： | | | | | | | | | | | | | | 职工所在部门负责人： | | | | | | | | | | | | 档案编号： | | | | |