附件：

**四川电子机械职业技术学院**

**2017届毕业生就业困难帮扶申请表**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 系别 |  | | 姓名 | |  | | | | 性别 | |  |  |
| 民族 |  | | 专业 | |  | | | | | | |
| 身份证号 | | |  | | | | | | | | |
| 联系电话 | | |  | | | | | | | | |
| 家庭成员 | | 称谓 | | 工作单位 | | | | | | 年收入（元） | | 联系电话 |
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| 是否就业 | | |  | | | 就业单位 | |  | | | | |
| 在校所获奖励 | | |  | | | | | | | | | |
| 所获资格证书或等级证书 | | |  | | | | | | | | | |
| 困难事实 | | |  | | | | | | | | | |
| 系部审核意见    盖章  年 月 日 | | | | | | | 就业部门审核意见  盖章  年 月 日 | | | | | |