《抚州市灵活就业一件事》申请表

申请日期： {{applyTime}}

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 | | {{applyName}} | | 性别 | {{applySex}} | 民族 | 民族 {{nation}} | | 出生年月 | | | {{applyBirthDay}} | |
| 户籍所在地 | | | {{registeredResidence}} | | | | | | | | | | |
| 户籍性质 | 农业 | | 非农业 | 婚否 | {{whetherMarried}} | 学历 | | {{education}} | | 毕业院校及毕业时间 | | | {{graduationSchool}}  {{graduationTime}} | |
| {{natureTrue}} | | {{natureFalse}} |
| 身份证号码 | | | {{idCardNum}} | | | | | | | | | | |
| 联系电话 | | | {{applyPhone}} | | | | | | | | | | |
| 现居住地 | | | {{liveAddress}} | | | | 是否属就业困难人员 | | | | {{whetherEmploymentDifficulties}} | | |
| 灵活就业 | | | 灵活就业日期 | | | | 灵活就业地 | | | | | | |
| {{employmentDifficultiesTime}} | | | | {{employmentDifficultiesAddress}} | | | | | | |
| 灵活就业类型 | | | | 灵活就业项目 | | | | | | |
| {{employmentDifficultiesType}} | | | | {{employmentDifficultiesItem}} | | | | | | |
| 《就业失业登记证》编号 | | | {{employmentRegisterNum}} | | | | | | | | | | |
| 社会保险登记 | | | {{wheherProcessInsurance}}该事项 | | | | | | | | | | |
| 社保参保地 | | {{insuranceArea}} | | | | | | | | |
| 申请参保时间：{{applyInsuranceTime}} | | | | | | | | | | |
| 基本医疗保险参保和变更 | | | {{wheherProcessMedical}}该事项 | | | | | | | | | | |
| {{whetherMedicalInsurance}} | | | | | | | | | | |
| 医保参保地 | | {{medicalInsuranceArea}} | | | | | | | | |
| 灵活就业社会保险费申报 | | | {{wheherProcessApply}}该事项 | | | | | | | | | | |
| 申报地 | | {{applyArea}} | | | | | | | | |
| 承诺信息 | | | 本人承诺上述所填内容均属实，所提交各项申请材料均真实有效，如有虚假，愿承担一切法律责任。  承诺人：{{@applySignature}} | | | | | | | | | | |