宁波市参保职工技能提升补贴申领表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 | |  | | | | | | 所在(原)企业名称 | | | | | | | | | |  | | | | | | | | |
| 证书编号 | |  | | | | | | | | | | | | 颁证日期 | | | |  | | | | | | | | |
| 职业(工种) | |  | | | | | | | | | | | | 证书等级 | | | |  | | | | | | | | |
| 颁证机构 | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| 联系地址 | |  | | | | | | | | | | | | | | | | 联系电话 | | |  | | | | | |
| 身份证号 | |  |  |  | |  |  | | |  |  |  | | |  |  |  | |  |  | |  |  |  |  |  |
| 目前就业  失业状况  状态 | | □企业职工 □失业人员 | | | | | | | | | | | 最后一次失业保险  参保地 | | | | | | | | |  | | | | |
| 代理人姓名 | |  | | | | | | | 代理人身份证号 | | | | | | | |  | | | | | | | | | |
| 银行卡或社会保障卡号 | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| 承诺书  本人承诺以上内容及所提供的材料真实有效，持有的证书未享受过职业培训补贴或职业技能鉴定补贴，如有虚假不得享受相关补贴，并承担相应法律责任。  申请人签字：  或代理人签字：  申请日期： 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 经办  机构  审核 | 根据宁波市参保职工技能提升补贴政策有关规定，申请人取得  职业（工种） 级资格证书，可享受技能提升补贴 元。    经办人（签章）： 复核人（签章）：    经办机构（盖章）： | | | | | | | | | | | | | | | | | | | | | | | | | |