**云南师范大学工会困难教职工帮扶申请表**

序号                                    填写日期：      年   月   日

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 部门单位 | | ​ | | | | | 职工编号 | | | ​ | | | 帮扶类别 | | ​ |
| 姓 名 | | 民 族 | | 性 别 | | 政治面貌 | | | 身份证号码 | | | | | | 健康状况 |
| ​ | | ​ | | ​ | | ​ | | | ​ | | | | | | ​ |
| 住房类别 | | 建筑面积 | | | 家庭住址 | | | | | | | 联系电话 | | | 邮政编码 |
| ​ | | ​ | | | ​ | | | | | | | ​ | | | ​ |
| 家庭主要成员关系 | 姓名 | 关系 | 性别 | | 出生日期 | | | 健康状况 | | | 月均收入 | | | 工作单位 | |
| ​ | ​ | ​ | | ​ | | | ​ | | | ​ | | | ​ | |
| ​ | ​ | ​ | | ​ | | | ​ | | | ​ | | | ​ | |
| ​ | ​ | ​ | | ​ | | | ​ | | | ​ | | | ​ | |
| ​ | ​ | ​ | | ​ | | | ​ | | | ​ | | | ​ | |
| 申请原因 | ​ | | | | | | | | | | | | | | |
| 部门工会意见 | ​ | | | | | | | | | | | | | | |
| 基层党组织意见 | ​ | | | | | | | | | | | | | | |
| 校工会  意见 | ​ | | | | | | | | | | | | | | |

   备注：填写《云南师范大学困难教职工帮扶申请表》必须客观真实，提交申请表对需附身份证复印件，另需提供与困难教职工共同生活的家庭成员收入证明，是低保户的需提供低保原件和复印件；根据申请的类别，还需提供相应的证明和资料。