## 创业带动就业补贴花名册

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 申请单位名称（盖章）： |   | 统一社会信用代码： |  申请表编号： |  |
| 联系人： |  | 联系电话： |  |  |
| 序号 | 姓名 | 性别 | 身份证号码 | 签订劳动合同期限（年月日-年月日） | 参保起始时间（年月） | 手机号码 |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |