附件5

XXXXX学院2025届广东省城乡低保家庭毕业生求职补贴人员花名册

申请单位名称（公章）： 申请日期： 申请表编号：

联系人： 联系电话：

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| 序号 | | 姓名 |  | 性别 | 家庭地址 | 身份证件  号码 | 人员  类别 | 证件名称 | 证件号码 | 发证机关 | 开户银行 | 银行账号 | 联系电话 | 备注 |
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|  | 共补贴 人， 元。 | | | | | | | | | | | | | |