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| 附件1:  宁夏义务教育阶段家庭经济困难学生生活补助申请表 | | | | | | | | | | | | | | | |
| 学校： | | | | | | | | 班级： | | |  | | 年级： | | |
| 学生基本情况 | 姓名 | |  | | | 性别 | |  | 是否寄宿 | | □是□否 | | | 照片粘贴处 | |
| 出生年月 | |  | | | | | | 籍贯 | |  | | |
| 身份证号 | |  | | | | | | 家庭  人口 | | |  | |
| 家 庭 主 要 情 况 | 监护人姓名 | |  | | | | | 性别 |  | 与学生  关系 | | |  | | |
| 监护人身份证号 | | |  | | | | | 邮政编码 | |  | | |
| 详细通讯地址 | | |  | | | | | | | 监护人  手机号 | | |  | |
| 家  庭  主  要  成  员 | 姓名 | | 年龄 | 与学生关系 | | 所在单位 | | | | | | 职业 | | 备注 |
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| 脱贫（原建档立卡）家庭学生： ☑是是 ； | | | | | | | | 残疾学生： □是 ； | | | | | | |
| 城乡低保家庭学生： □是 ； | | | | | | | | 城乡特困救助供养学生： □是 ； | | | | | | |
| 边缘易致贫家庭学生： □是 ； | | | | | | | | 脱贫不稳定家庭学生： □是 ； | | | | | | |
| 学生和家长承诺并签字 | 我们承诺：以上学生及其家庭信息真实合法，如有骗取国家资助 | | | | | | | | | | | | | | |
| 等不良后果的由学生及其监护人负责。 | | | | | | | | | | | | | | |
| 学生本人签字： | |  | | | 监护人  签字： | | | | | 提出申请和承诺时间： | | | | |
| 20 年 月 日 | | | | |
| 班级审核意见： | | | | | | | | 校长审核意见： | | | | | | | |
| （班主任签字）： | | | | | | | | （公章） 年 月 日 | | | | | | | |
| 备注：1、家长（监护人）需提交《居民户口簿》、《扶贫手册》、《低保证》、《残疾证》、银行流水等有效证件原件和复印件或乡村振兴局、民政部门贫困人口系统截图，原件由学校核验后退回，复印件及本表交由学校存档；2、如无证件学校要打印资助系统截屏存档；3、本表所有签字栏不可代签。 | | | | | | | | | | | | | | | |

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| 附件2 | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |
|  | 义务教育阶段学校家庭经济困难学生生活补助资金发放花名册 | | | | | | | | | | | | | | | | | | |
| 学校名称**：** | | |  |  |  |  |  |  |  |  |  |  |  | | 时间： 2023春季学期 | | | | |
| **序号** | | **学生姓名** | **身份证号** | **学校名称** | **年级（1-9）** | **班级（1.2.3…）** | **贫困类型** 脱贫（原建档立卡）、城乡低保家庭学生、城乡特困救助供养学生、残疾学生、边缘易致贫家庭学生、脱贫不稳定家庭学生 | **是否寄宿** | **监护人姓名** | **家庭住址（与户口本一致）** | **监护人与学生的关系** | **监护人手机号** | **监护人银行卡号** | **开户行名称** | | **发放金额** | **学生签字** | **享受人身份证号** | **备注** |
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| 附件3: |  |  | |  | |  |  | | |  | |  |  | |  | |  | | |  | |  |  |
| 2023年春季学期义务教育阶段家庭经济困难 | | | | | | | | | | | | | | | | | | | | | | | |
| 学生生活补助资金执行情况汇总表 | | | | | | | | | | | | | | | | | | | | | | | |
| 填报单位： |  |  | |  | |  | | |  | | 填报时间： | | | | | |  | | | | 年 月 日 |  |  |
| 市县（区）及学校名称 | 享受家庭经济困难学生生活补助人数 | | | | | | | | 以前学期结余（元） | | 下达指标金额（元） | | | 发放标准（元/人/学期） | | | | | | | 发放总金额（元） | 本学期结余（元） | 备注 |
| 小 学 | | | 初 中 | | | | | 小 学 | | | | 初 中 | | |
| 寄宿 | | 非寄宿 | | 寄宿 | | | 非寄宿 | 寄宿 | | 非寄宿 | | 寄宿 | 非寄宿 | |
| **XX市县（区）合计** |  | |  | |  | | |  |  | |  | | | **500** | | **250** | | **625** | **312.5** | |  |  |  |
| XX学校 |  | |  | |  | | |  |  | |  | | |  | |  | |  |  | |  |  |  |
| XX学校 |  | |  | |  | | |  |  | |  | | |  | |  | |  |  | |  |  |  |
| XX学校 |  | |  | |  | | |  |  | |  | | |  | |  | |  |  | |  |  |  |
| XX学校 |  | |  | |  | | |  |  | |  | | |  | |  | |  |  | |  |  |  |
| 单位负责人（签字）： | | | |  | |  | | |  | |  | | |  | |  | |  |  | | 经手人（签字） | |  |

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| 附件4: | |  | | |  |  | |  |
| 义务教育阶段学校家庭经济困难学生生活补助资金发放汇总表 | | | | | | | | |
| 学校名称： | | |  | 时间：2023春季学期 | | | | |
| **学段** | **是否寄宿** | | **贫困类型** | **人数** | | **标准** | **金额（元）** | |
| **小学** | **寄宿学生** | | 脱贫（原建档立卡）家庭学生 |  | | 500 | 0 | |
| 城乡低保家庭学生 |  | | 500 | 0 | |
| 城乡特困救助供养学生 |  | | 500 | 0 | |
| 残疾学生 |  | | 500 | 0 | |
| 边缘易致贫家庭学生 |  | | 500 | 0 | |
| 脱贫不稳定家庭学生 |  | | 500 | 0 | |
| **小计** | **0** | | 500 | **0** | |
| **非寄宿学生** | | 脱贫（原建档立卡）家庭学生 |  | | 250 | 0 | |
| 城乡低保家庭学生 |  | | 250 | 0 | |
| 城乡特困救助供养学生 |  | | 250 | 0 | |
| 残疾学生 |  | | 250 | 0 | |
| 边缘易致贫家庭学生 |  | | 250 | 0 | |
| 脱贫不稳定家庭学生 |  | | 250 | 0 | |
| **小计** | **0** | | 250 | **0** | |
| **初中** | **寄宿学生** | | 脱贫（原建档立卡）家庭学生 |  | | 625 | 0 | |
| 城乡低保家庭学生 |  | | 625 | 0 | |
| 城乡特困救助供养学生 |  | | 625 | 0 | |
| 残疾学生 |  | | 625 | 0 | |
| 边缘易致贫家庭学生 |  | | 625 | 0 | |
| 脱贫不稳定家庭学生 |  | | 625 | 0 | |
| **小计** | **0** | | 625 | **0** | |
| **非寄宿学生** | | 脱贫（原建档立卡）家庭学生 |  | | 312.5 | 0 | |
| 城乡低保家庭学生 |  | | 312.5 | 0 | |
| 城乡特困救助供养学生 |  | | 312.5 | 0 | |
| 残疾学生 |  | | 312.5 | 0 | |
| 边缘易致贫家庭学生 |  | | 312.5 | 0 | |
| 脱贫不稳定家庭学生 |  | | 312.5 | 0 | |
| **小计** | **0** | | 312.5 | **0** | |
| **家庭经济困难学生生活补助合计** | | | | **0** | |  | **0** | |
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| 经手人人： |  | | 审核人： | | | 校长： | | |
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| 附件5：  同心县2023年春季学期义教教育阶段家庭经济困难学生生活补助分配表 | | | | | | | | | | | |
| 填报学校：(公章） | |  |  | 单位：人、元 | | | 填报日期： | | | | |
| 序号 | 学校名称 | 小学部/初中部 | 寄宿 | | | 非寄宿 | | | 合计（人） | 合计（元） | 备注 |
| 人数 | 补助标准（元/人/学期） | 小计（元） | 人数 | 补助标准（元/人/学期） | 小计（元） |
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| 附件6： | | | | | | | | | |
| 同心县 学校义务教育阶段家庭经济困难学生  生活补助公示表 | | | | | | | | | |
| 序号 | 学校名称 | 学生姓名 | 年级 | 班级 | 序号 | 学校名称 | 学生姓名 | 年级 | 班级 |
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