**揭阳市社会保障卡个人业务申请表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| \*姓 名 |  | | | | \*性别 | | | | |  | | | | | | \*民族 | | | | | | |  | | | | | | | | | \*国籍 | | | | | | |  | | | | | | | | | | 个人相片  （二代身份证标准的一寸白底彩色） | | | | | |
| \*证件类型 |  | \*证件号码 | | |  | |  | |  | |  | |  | |  | | | |  | |  | | |  | |  | | | | |  | | |  |  | |  | | |  | |  | | |  | |  | |
| \*证件有效期 |  | | | | | | | | | | | | | \*发证机关 | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| \*出生日期 |  | | | | | \*手机号码 | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| \*通讯地址 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| \*申请类型 | □申请 □挂失 □解除挂失 □补卡 □卡损坏换卡（□人为损坏 □非人为损坏） □卡面信息变更换卡 □逾有效期换卡 □服务银行变更换卡 □卡注销（□转移到省外 □出国定居 □死亡 □其它） □临时卡申请 □修改密码 □密码解锁 □密码重置 □即时补卡 □即时换卡 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| \*开户银行 | □工商银行、□农业银行、□中国银行、□建设银行、□邮储银行、□广发银行、□交通银行、  □农信社（农商银行）、□其他 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 户籍性质 | □本省户籍 □非本省户籍 □台港澳人员 □外国人 □华侨 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 户籍地 |  | | 户籍地址 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 文化程度 | □博士 □硕士 □大学 □大专 □中专 □技校 □高中 □职高 □初中 □小学 □文盲 □其他 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 工作状态 | □就业 □退休 □离休 □失业 □无业 □退职 □从未就业 □其他 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 职 业 | □公务员 □事业单位 □军人警察 □企业员工 □私营业主 □学生 □自由职业 □退休 □其他 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 个人身份状态 | □城镇职工 □城镇居民 □农民 □其他 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 单位名称 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | 单位地址 | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| 联系电话 |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | 电子邮箱 | | | | | | | | | |  | | | | | | | | | | | | | | | |
| 代办人（监护人）姓名 |  | | | 证件类型 | | | | | | | | □身份证 □户口簿 □通行证 □护照 □其他 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 联系电话 |  | | | 证件号码 | | | | | | | |  | | | | |  | | |  | |  | | |  | | | | |  | | |  | | |  | |  | | |  | | |  | |  | |  | |  |  |  |  |  |
| **（有效证件复印件粘贴处）**  1.年满16周岁的中国公民粘贴身份证正、背面复印件  2.未满16周岁的中国公民，粘贴申领人居民户口簿及监护人证明文件  3.华侨粘贴护照复印件  4.香港、澳门特别行政区居民粘贴港澳居民来往内地通行证复印件  5.台湾居民粘贴台湾居民来往大陆通行证复印件  6.外国居民粘贴护照或外国人永久居留证复印件 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 本人授权申明：  本人保证本表填写内容和所附的全部资料真实、合法、有效，对所填写的信息负责，自愿遵守人社部门和开户银行关于社会保障卡的相关规定。  申请人（代办人）签名： 时间： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 业务经办人签名： | | | | | | | | | | | |