**附件3**

人力资源情况汇总表

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **企业缴纳社保人员情况** | | | | | | | | | | | |
| 序号 | 姓名 | | | 是否缴纳 | | | 企业缴纳/个人缴纳 | | | | 社保类型 |
| 1 |  | | |  | | |  | | | |  |
| ... |  | | |  | | |  | | | |  |
| **备注**：**请按照要求填写企业缴纳社保人员情况（如未缴纳社保请提供书面说明）** | | | | | | | | | | | |
| **企业在职人员签订情况** | | | | | | | | | | | |
| 序号 | | 姓名 | | | 联系电话 | | | | 是否签订合同（合同类型） | | |
| 1 | |  | | |  | | | |  | | |
| ... | |  | | |  | | | |  | | |
| **企业兼职人员签订情况** | | | | | | | | | | | |
| 序号 | | 姓名 | | | 联系电话 | | | | 是否签订合同（合同类型） | | |
| 1 | |  | | |  | | | |  | | |
| ... | |  | | |  | | | |  | | |
| **企业临聘人员签订情况** | | | | | | | | | | | |
| 序号 | | 姓名 | | | 联系电话 | | | | 是否签订合同（合同类型） | | |
| 1 | |  | | |  | | | |  | | |
| ... | |  | | |  | | | |  | | |
| **备注**：**请按照要求填写企业签订劳动合同情况（如未签订请提供书面说明）** | | | | | | | | | | | |
| **企业科技人员情况** | | | | | | | | | | | |
| 序号 | | | 姓名 | | | 学历 | | 所在部门 | | 入职时间 | |
| 1 | | |  | | |  | |  | |  | |
| ... | | |  | | |  | |  | |  | |