**附件1：**

**江苏陶欣伯助学基金会“伯藜助学金”申请表**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **本 人 情 况** | **姓 名** | |  | | | | | **性 别** | |  | **出生日期** | |  | | | **民族** | | |  | | **照片** | | |
| **学 号** | |  | | | | | | | | **身份证号** | |  | | | | | | | |
| **大学 学院（系） 班** | | | | | | | | | | | | | | | | | | | |
| **联系电话** | | | |  | | | | | | **电子邮件** | | |  | | | | | | |
| **QQ号** | | |  | | | | | | |
| **宿 舍** |  | | | | | **辅导员姓名** | | | | | |  | | | | **辅导员**  **联系电话** | | | | |  | |
| **家庭成员情况** | **姓 名** | | | | | **年龄** | **与本人关系** | | | | **工作或学习单位** | | | | | | | | | **联系电话** | | | |
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| **家庭经济情况** | **家庭户口** | | | | | | | | **城镇（ ）**  **农村（ ）** | | | **家庭人口总数** | | | | | |  | | | | | |
| **家庭年收入（元）** | | |  | | | | | **收入来源** | | |  | | | | | | **测评总分** | | | | |  |
| **家庭住址** | | |  | | | | | | | | | | | | | | **邮政编码** | | | | |  |
| **申请者个人理由** | **签名 年 月 日** | | | | | | | | | | | | | | | | | | | | | | |
| **院（系）意见** | **盖章（签名） 年 月 日** | | | | | | | | | | | | | 学校意见 | **盖章（签名） 年 月 日** | | | | | | | | |
| **基金会意见** | **盖章 年 月 日** | | | | | | | | | | | | | | | | | | | | | | |