附件2：

用人单位劳动用工基本信息调查表

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 一、基本信息 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 单位名称 | | | | |  | | | | | | | | | | | | | | | | | | | 组织机构代码 | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| 注册登记机关 | | | | |  | | | | | | | | | | | | | | | | | | | 邮政编码 | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| 单位详细地址 | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 登记注册类型 | | | | | □国有企业 □集体企业 □私营企业 □股份制企业 □有限责任公司 □港澳台商投资 □外商投资 □民办非企业单位 □机关事业及社团组织 □个体经济组织 □其他 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 行业类型 | | | | | □建筑、装饰装潢 □电力 □采矿业 □批发零售 □交通运输 □加工制造 □餐饮娱乐 □职业介绍 □职业技能鉴定  □其他 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 法定代表/负责人 | | | | |  | | | | | | | | | | | | 联系电话 | | | | | | |  | | | | | | | | 移动电话 | | | | | | | |  | | | | | | | | | | |
| 人力资源经办人 | | | | |  | | | | | | | | | | | | 联系电话 | | | | | | |  | | | | | | | | 移动电话 | | | | | | | |  | | | | | | | | | | |
| **二、劳动用工** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | 合计 | | | | | | 其中 | | | | | | | | | | | | | | | | | | | 劳动合同分类 | | | | | | | | | | | | | | | | | | | | 劳动合同是否交付劳动者一份 | | |
| 城镇职工 | | | | | 农村职工 | | | | | 台港澳台、  外国人 | | | | | 其他 | | | | 固定期限 | | | | | | | | 无固定  期限 | | | 完成一定工作  任务为期限 | | | | | | | | |
| 全日制用工人数 | | |  | | | | | |  | | | | |  | | | | |  | | | | |  | | | |
| 签订劳动合同人数 | | |  | | | | | |  | | | | |  | | | | |  | | | | |  | | | |  | | | | | | | |  | | |  | | | | | | | | | □是 □否 | | |
| 其中用工 | | | 合计 | | | | | | 非全日制用工 | | | | | 返聘离退休人员 | | | | | 聘用下岗、  内退人员 | | | | | 外单位借用  人员 | | | | 实习生  勤工助学人员 | | | | | | | | | 劳务派遣人员 | | | | | | | | | | | 其他 | | |
|  | | | | | |  | | | | |  | | | | |  | | | | |  | | | |  | | | | | | | | |  | | | | | | | | | | |  | | |
| **三、工资支付** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 职工工资计发方式 | | | | | | | □计时 □计件 □其他 | | | | | | | | 工资发放形式 | | | | | | | | | □现金 □银行代发 | | | | | | | | | 最低月工资 | | | | | | | | | | | | | 元 | | | | |
| 月工资支付日期 | | | | | | |  | | | | | | | | 是否按规定支付  加班工资 | | | | | | | | | □是 □否 | | | | | | | | | 企业职工平均月工资 | | | | | | | | | | | | | 元 | | | | |
| **四、社会保险** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 是否已办社会保险登记 | | | | | | | | | | □是 □否 | | | 上年度工资总额 | | | | | | | | 元 | | | | | | | | | | | | | | 申报缴费基数 | | | | | | | 元 | | | | | | | | |
| 养老保险  参加人数 | | 人 | | | | | | | | 医疗保险参加人数 | | | 人 | | | | | 生育保险  参加人数 | | | 人 | | | | | | | | 工伤保险参加人数 | | | | | | 人 | | | | | | | 失业保险  参加人数 | | | | | | | 人 | |
| **五、工时休假** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 实行标准工 时制人数 | 人 | | | | | | | 日工作时长 | | | 小时 | | | | | 周工作天数 | | | | | | 天 | | | | 最长日加班时长 | | | | | | | | 小时 | | | | | | | 最长月加班时长 参加人数 | | | | | | | | | 小时 |
| 实行综合计时制人数 | 人 | | | | | | | 实行不定时  工作制人数 | | | 人 | | | | | 审批文号 | | | | | |  | | | | | | | | | | | | 审批时间 | | | | | | |  | | | | | | | | | |
| 是否有劳动者签字确认的考勤记录 | | | | | | | | | | | □是 □否 | | | | | | | | | | | 是否履行带薪休假制度 | | | | | | | | | | | | | | | | | | | □是 □否 | | | | | | | | | |
| **六、特殊保护** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 职工最小年龄 | | | 周岁 | | | | | | | | | | | 未成年工人数 | | | | | | | | | 人 | | | | 办理未成年工登记 | | | | | | | | | | | | | | | | □是 □否 | | | | | | | | |
| 女职工享受  最短产假 | | | 天 | | | | | | | | | | | 女职工人数 | | | | | | | | | 人 | | | | 是否安排女职工，未成年工从事国家规定禁忌从事的劳动 | | | | | | | | | | | | | | | | □是 □否 | | | | | | | | |
| **七、规章制度** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 是否建立 | | | | □是 □否 | | | | | | | | 是否经职工代会或工会等协商 | | | | | | | | | | | | | □是 □否 | | | | | 是否向劳动者公示 | | | | | | | | | | | | | | □是 □否 | | | | | | |
| **八、其它** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 从事技术工种人数 | | | | | | 人 | | | | | | | | | | | | | | 持有技术工种职业资格证书人数 | | | | | | | | | | | | | | | | | | | | | | | | | 人 | | | | | |
| 是否组建工会 | | | | | | □是 □否 | | | | | | 是否签订集体合同 | | | | | | | | □是 □否 | | | | | | | | | | | 是否已报劳动保障部门审查 | | | | | | | | | | | | | | | | □是 □否 | | | |
| 是否要求劳动者提供担保或以其它名义收取财物 | | | | | | | | | | | | | | | | □是 □否 | | | | 是否扣押劳动者身份证或其它证件 | | | | | | | | | | | | | | | | | | □是 □否 | | | | | | | | | | | | |

用人单位盖章: 用人单位经办人(签字) 日期 ：

调查员(签字): 、 日期： 调查员联系电话：

邵阳市用人单位劳动用工基本信息调查表填表说明

一、填报范围：区域内所有的用人单位，包括企业、个体经济组织、民办非企业单位、国家机关、事业单位和社会团体；

二、该表由用人单位如实填报；

三、用人单位经办人应认真核对调查表内容，确认无误后签章，并加盖用人单位公章；

四、该表指标均为必填项，如有不存在的情况，填“0”；

五、“□”为勾选项；

六、用人单位认为应该说明的情况可以书面形式上报；

七、个别指标说明：

（一）单位名称：填写单位全称；下属分支机构如有独立注册登记证的，应单独填写另一张表格；

（二）法定代表人／负责人：以营业执照、批准文件、任命文件为准；

（三）注册登记机关、注册登记类型、行业类型：按照注册登记证上填写；

（四）单位详细地址：按实际办公或经营地址填写；

（五）在“注册登记类型”、“行业类型”、“其他用工”中选择“其他”指标项时，应注明种类；

（六）“全日制用工人数”、“签订劳动合同人数”、“其他用工”中的“合计（）”指标等于后面几项阿拉伯数字指标之和；

（七）规章制度：如职工录用、考核、离职规批定、工资支付、福利待遇、保密和奖惩等规定和员工手册。