**同济大学在职（学）人员因私出国出境 旅游 、探亲申请表**

**人员类别: 在职教职工〇 本专、科学生〇 研究生〇 填表日期: 年 月 日**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **姓 名** | |  | | | | **性别** | |  | | | | **工作证或学生证号** | | | | | | | | | |  | | **贴**  **照**  **片** |
| **出 生 地** | |  | | **民族** | | |  | **党派** | | | | |  | | | | | **籍贯** | | | |  | |
| **出 生** | | **年 月 日** | | | | | | **身份证号码** | | | | | | | | | |  | | | | | |
| **现 职 务** | |  | | | | | **现 职 称** | | | | | |  | | | | | | | | | | |
| **家庭住址** | |  | | | | | | | **邮政编码** | | | | | | |  | | | | | **电话** | | |  |
| **单位部门** | |  | | | | | | | | | **家庭联系人、联系电话** | | | | | | | | | | | |  | |
| **身体状况是否具备正常出境所需的身体要求** | | | | | | | | | | | | | |  | | | | | | | | | | |
| **申请**  **出境**  **栏目** | **探亲**  **访友** | | **目的地：** | | | | | | | **起止日期：** | | | | | | | | | | | **邀请人姓名：** | | | |
| **与本人关系：** | | | |
| **旅游** | | **目的地：** | | | | | | | **起止日期：** | | | | | | | | | | | **旅行社名称：** | | | |
|  | | | |
| **因私护照（通行证）号码** | | | | |  | | | | | | | | | | **有效期** | | | | |  | | | | |
| **因私护照（通行证）具有何国（地区）有效签证（注）** | | | | | | | | | | | | | | | | | | |  | | | | | |
| **申请人声明：以上所填情况均属实，本人愿对所填内容承担相应法律责任，同时承诺：保证在上述时间因私出境结束后按期回国。**  **本人签名： 日期：** | | | | | | | | | | | | | | | | | | | | | | | | |
| **系部/院意见（在职人员）：**  **领导签字： （盖章） 年 月 日** | | | | | | | | | | | | | | | | | **教务处或研究生院意见（在学人员）：**      **（盖章） 年 月 日** | | | | | | | |
| **外办审核：**  **（盖章） 年 月 日** | | | | | | | | | | | | | | | | | | | | | | | | |