附件

扶贫对象精准脱贫效果评价表

填表日期：

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 扶贫对象 | | 户主姓名及电话 | | | | | |  | | | 包抓部门 | | | |  | |
| 村组（社区） | | | | | |  | | | 包户干部及电话 | | | |  | |
| 脱贫对象家庭成员基本情况 | | 姓名 | | 与户主  关系 | | | | 具体帮扶政策 | | | | | | | | |
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| 政策落实满意度 | | 非常满意 □ | | | | | | | 基本满意 □ | | | 不满意 □ | | | | |
| 经营性收入 | 第一产业 | | 种植类型 | |  | | | | | 亩数 |  | | 收入 | |  | |
| 养殖类型 | |  | | | | | 头数  （只、羽） |  | | 收入 | |  | |
| 第三产业 | |  | | | | | | | | | | | | | |
| 财产性收入 | （1）土地流转收入 | | | | | |  | | | | | | | | | |
| （2）房屋出租收入 | | | | | |  | | | | | | | | | |
| 转移性收入 | 1.失地农民补贴（双八百） | | | | | |  | | | | | | | | | |
| 2.养老保险 | | | | | |  | | | | | | | | | |
| 3.高龄补贴 | | | | | |  | | | | | | | | | |
| 4.粮食补贴 | | | | | |  | | | | | | | | | |
| 5.残疾补贴 | | | | | |  | | | | | | | | | |
| 6.其他补贴 | | | | | |  | | | | | | | | | |
| 工资性收入 |  | | | | | | | | | | | | | | | |
| 家庭主要收入来源 |  | | | | | | | | | | | | | | | |
| 合 计 |  | | | | | | | | | | | | | | | |
| 家庭人均年收入 |  | | | | | 达到脱贫标准 | | | | 是 □ | | | | | | |
| 否 □ | | | | | | |
| 脱贫对象  意见 |  | | | | | 包户干部意见 | | | |  | | | | 包抓部门意见 | |  |
| 所在村委会意见 |  | | | | | 镇办意见 | | | |  | | | | 区脱贫办  意见 | |  |