**ANEXO III**

**PERSONAL CONTRADO LABORAL**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Nº Expediente** |  |  | **Nombre Apellidos trabajador/a** |  |
| **Entidad beneficiaria** |  |  | **DNI** |  |
| **CIF** |  |  | **Nº Seguridad Social** |  |
|  |  |  | **Categoría Grupo cotización** |  |
|  |  |  | **Código CNAE** |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Mes** | **Jornada laboral semanal (horas) (max.40h)** | **Horas mensuales imputadas al proyecto** | **% horas dedicación al proyecto** | **Ret.IRPF**  **(1)** | **SS Trabajador (2)** | **Sueldo Neto**  **(3)** | **Sueldo Bruto**  **(1+2+3)** | **SS Empresa** | **Bonificación Cuotas SS** | **TOTAL (€) Imputado a subvención** |
| Mes 1 |  |  |  |  |  |  |  |  |  |  |
| Mes 2 |  |  |  |  |  |  |  |  |  |  |
| Mes 3 |  |  |  |  |  |  |  |  |  |  |
| Mes 4 |  |  |  |  |  |  |  |  |  |  |
| Mes 5 |  |  |  |  |  |  |  |  |  |  |
| Mes 6 |  |  |  |  |  |  |  |  |  |  |
| Mes 7 |  |  |  |  |  |  |  |  |  |  |
| Mes 8 |  |  |  |  |  |  |  |  |  |  |
| Mes 9 |  |  |  |  |  |  |  |  |  |  |
| Mes 10 |  |  |  |  |  |  |  |  |  |  |
| Mes 11 |  |  |  |  |  |  |  |  |  |  |
| Mes 12 |  |  |  |  |  |  |  |  |  |  |
| Mes 1 ampliado |  |  |  |  |  |  |  |  |  |  |
| Mes 2 ampliado |  |  |  |  |  |  |  |  |  |  |
| Mes 3 ampliado |  |  |  |  |  |  |  |  |  |  |
| Mes 4 ampliado |  |  |  |  |  |  |  |  |  |  |
| Mes 5 ampliado |  |  |  |  |  |  |  |  |  |  |
| Mes 6 ampliado |  |  |  |  |  |  |  |  |  |  |
| **TOTAL** | | | | | | | | | |  |

Firma Representante Legal

Firma Trabajador