**学籍异动学生课表调整申请表**

**学年学期：**

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| **学院** |  | **学号** |  | **姓名** |  |
| **班级** |  | | **联系电话** |  | |
| **异动类别** | □转专业 □复学 □转学 □专升本 □延长学制 | | | | |
| **选 课 项 目** | **课程名称** | | | **学分** | **任课老师** |
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| **退 课 项 目** | **课程名称** | | | **学分** | **任课老师** |
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| **备注：** | | | | | |