**教务处统一特殊考试课程安排申请表**

**学年学期： 开课学院：**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| 序号 | 课程名称 | 课程代码 | 任课教师 | | 特殊安排原因 | | 特殊考试安排事项（移入或移出考试周等） |
| 1 |  |  | |  | |  |  |
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| 11 |  |  | |  | |  |  |
| 12 |  |  | |  | |  |  |
| **学院审核：**  **签章：**  **日期：** | | | | | | | |
| **教务处意见：**  **签字：**  **日期：** | | | | | | | |