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| **中国劳动关系学院学生转专业课程成绩置换申请表** | | | | | | | | | | |
| 姓名 |  | | 性别 | |  | | 联系电话 |  | | |
| 学号 |  | | 年级 | | | | ***20 级*** | | | |
| 原专业 |  | | | | | | | | | |
| 现专业 |  | | | | | | | | | |
| 置换课程成绩统计 | **原专业** | | | | | **现专业** | | | **教研室主任签字** | |
| **序号** | **课程名称** | | **成绩** | | **课程名称** | | |
| 1 |  | |  | |  | | | 课程名称相同不需认定 |  |
| 2 |  | |  | |  | | |  |
| 3 |  | |  | |  | | |  |
| 4 |  | |  | |  | | |  |
| 5 |  | |  | |  | | |  |
| 6 |  | |  | |  | | |  |
| 7 |  | |  | |  | | |  |
| 8 |  | |  | |  | | |  |
| 所在学院  意见 | 院长签字： （盖章） 年 月 日 | | | | | | | | | |
| 教务处  意见 | 负责人签字： （盖章） 年 月 日 | | | | | | | | | |