**杭州职业技术学院课程重修申请表**

**学年第 学期 填表时间 年 月 日**

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| 姓名 |  | | | | 学号 |  | 学院 | | |  | |
| 专业 |  | | | | 班级 |  | 联系电话 | | |  | |
| 不及格课程 | | | | | | 申请重修课程 | | | | | |
| 课程名称及代码 | | 学分 | 学时 | 课程性质 | | 课程名称及代码  （二次重修需注明） | | 学分 | 学时 | | 课程性质 |
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| 专业负责人审核意见 | |  | | | | | | | | | |
| 学生所在学院审核意见 | |  | | | | | | | | | |
| 开课院（部）意见 | |  | | | | | | | | | |
| 备注 | |  | | | | | | | | | |

注：本表一式两份，原件由学院存档，复印件交于学生留存。