**长江大学文理学院学籍异动学生课程替换申请表**

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| **系部** | |  | | | **姓名** |  | | **专业** | |  | |
| **班级** | |  | | | **学号** |  | | **学籍异动原因** | |  | |
| **序号** | **已修课程名称** | | **学时** | **学分** | **课程类别** | **成绩** | **拟替换课程名称** | | **替换**  **学分** | | **课程类别** |
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|  |  | |  |  |  |  | **替换学分合计** | |  | | |
| **学生所在系部意见** | | | **负责人签字： 日期：**  **（盖章）** | | | | | | | | |
| **教学工作部意见** | | | **负责人签字： 日期：**  **（盖章）** | | | | | | | | |

说明：1.学籍异动原因： 转专业、留级、复学。

2.本表一式二份，教学工作部、系部各一份。