附件1：

**特殊情况增删课申请表**

**xx-xx学年第x学期**

1. **情况说明**

|  |
| --- |
| **本科生****□公选课试听退课 □特殊情况课程调整 □港澳台学生 □其他原因** |
| **申请增删课具体原因说明****特此申请****签名：** **日期：**  |

1. **个人基本信息**

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| --- | --- | --- | --- | --- | --- |
| 学号 |  | 姓名 |  | 教学班号填写 |  |
| 学院 |  | 专业 |  | 联系电话 |  |
| 邮箱 |  |

1. **需删除课程列表**

|  |  |  |  |
| --- | --- | --- | --- |
| **\***课程名称 | **\***任课教师 | **\***教学班 | 任课老师签字 |
|  |  |  |  |
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**三、需增加课程列表**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **\* 课程名称** | **\*任课****教师** | **\*上课****周次** | **\*上课****星期** | **\*上课****节次** | **\*上课****地点** | **教师****签字** |
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**\*为必填项，课程名称需填写全称，表格行数不够可自行添加。**