**长江大学2017年招收硕士生调剂申请表**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 考生姓名 | | |  | | | 性别 | |  | 民族 | | |  | | 出生年月 | | | | |  | | |
| 考生报名号 | | |  | | | | | | | | 考生编号 | |  | | | | | | | | |
| 身份证号码 | | |  | | | | | | | | 考试方式 | |  | | | | | | | | |
| 联系电话 手机及固定电话 | | |  | | | | | | | | | | 政治面貌 | | | | |  | | | |
| 第一志愿报考单位 | | | | |  | | | | | | | 报考专业代码及名称 | | | |  | | | | | |
| 第一志愿报考单位联系电话及传真 | | | | | | | | | |  | | | | | | | | | | | |
| 调剂专业方向意向 | | | | |  | | | | | | | | | | | | | | | | |
| 现学习工作单位 | | | | |  | | | | | | | | | | | | | | | | |
| 人事档案所在单位 及通讯地址 | | | | | 单位 | |  | | | | | | | | | | | | | 邮政编码 | |
| 地址 | |  | | | | | | | | | | | | |  | |
| 毕业学校年月及学制（统招、函授、自考） | | | | |  | | | | | | | | | | 最后学历 | | | | | |  |
| 最后学位 | | | | | |  |
| 何时、何地、何原因受过何种奖励 | | | | |  | | | | | | | | | | | | | | | | |
| 身体状况 | |  | | | | | | | | 大学英语考试等级 | | | | | | |  | | | | |
| 初试成绩表 | | | | | | | | | | | | | | | | | | | | | |
| 总分 | 政治理论 | | | 外国语名称及成绩 | | | | | | 业务课一名称及成绩 | | | | | | 业务课二名称及成绩 | | | | | |
|  | | | | | |  | | | | | |  | | | | | |
|  |  | | |  | | | | | |  | | | | | |  | | | | | |
| 我自愿放弃一志愿复式录取，同意调剂到长江大学读研。  请抄写以上语句：                                                                                                           申请人：        2017年   月   日 | | | | | | | | | | | | | | | | | | | | | |

备注：以上信息请手填后扫描发相关学院