**研究生培养计划课程变更申请**

**Application Form for Changing the Training Program**

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| **学 号**  **Student No.** |  | | | **姓 名**  **Name** | |  | **学院（研究院）**  **College** | | |  |
| **专 业**  **Discipline** |  | | | **联系方式**  **Contact Information** | |  | **指导教师**  **Supervisor** | | |  |
| **研究生类别**  **Student Type** | **□博士 □学术型硕士 □专业型硕士** | | | | | | | | | |
| **拟变更课程相关信息：**  **Course Changing:** | | | | | | | | | | |
|  | | **课程编号**  **Course No.** | **课程名称**  **Course Name** | | **课程类型**  **Course Type** | | | **是否已**  **选此课**  **Select the Course or not** | **变更原因**  **Reasons for Changing** | |
| **拟删除课程**  **Original Course** | |  |  | |  | | |  |  | |
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| **拟新增课程**  **New Course** | |  |  | |  | | |  |  | |
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|  |  | |  | | |  |  | |
| **导师意见Comment of the Supervisor:**  **导师签字**  **Signature：**  **年(Y) 月(M) 日(D)** | | | | | | | | | | |
| **学院（研究院）意见：**  **Comment of the College：**    **负责人签字（公章）**  **Signature：**  **年(Y) 月(M) 日(D)** | | | | | | | | | | |
| **培养办公室审核Academic Affairs of Graduate School**  **主楼B207 Administration Building B207** | | | | | | | | | | |

**备注：**1. 须在课程开始授课三周内或授课开始前，提交变更申请，其它时间不受理变更事宜。