**数学学院（珠海）查卷申请表**

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| **姓名** |  | **学号** |  |
| **联系电话** |  | | |
| **年级** |  | **班级** |  |
| **查卷科目** |  | | |
| **查卷时间** |  | | |
| **任课老师签字** |  | | |

**签名： 日期：**