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|  | **国家励志奖学金申请审批表 学年** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 学校： | | | |  | | | | | | 院系： | | | |  | | | | | 学号： | | | | |  | | | | | | | | |
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|  | **基本情况** | | | 姓名 | | |  | | | | | 性别 | | | |  | | | | 出生年月 | | | | |  | | | | | | | | |
|  | 政治面貌 | | |  | | | | | 民族 | | | |  | | | | 入学时间 | | | | |  | | | | | | | | |
|  | 身份证号 | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 专业 | | |  | | | | | 学制 | | | |  | | | | 联系电话 | | | | |  | | | | | | | | |
|  | **家庭经济情况** | | | 家庭户口 | | | | |  | | | | | | | | | | | 家庭人口 | | | | |  | | | | | | | | |
|  | 家庭经济困难学生 | | | | |  | | | | | | | | | | | 收入来源 | | | | |  | | | | | | | | |
|  | 通讯地址 | | | | |  | | | | | | | | | | | 邮政编码 | | | | |  | | | | | | | | |
|  | **学习情况** | | | 成绩排名： | | | | |  | | | (名次/总人数) | | | | | 实行综合考评排名： | | | | | | | |  | | | | | | | | |
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|  | 必修课 | | |  | | 门，其中及格以上 | | | | |  | | 门 | 如是,排名: | | | | |  | | | (名次/总人数) | | | | | | | | |
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|  | **大学期间主要获奖情况** | | | 日期 | | | | | | 奖项名称 | | | | | | | | | | 颁奖单位 | | | | | | | | | | | | | |
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|  | **申请理由** | | | 申请人签名(手签):  2023年 10 月 24 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | **推荐 意见** | | | xxxxx  该生符合条件，同意推荐。  推荐人(班主任)签名：  2023 年 10 月25 日 |
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|  |  | | | 经审核，同意推荐参加评审。  院系主管学生工作领导签名：  （院系公章）  2023 年 10 月 26 日 |
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|  |  |  |  | 经评审，并在校内公示 5 个工作日，无异议，同意该同学获得国家励志奖学金。  （学校公章）  2023 年 11 月 3 日 |
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