附件4：

2020-2021学年秋季学期转专业学生考核情况汇总表

二级学院名称：（公章） 院长签字：

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **序号** | **拟转入专业** | **学号** | **姓名** | **班级** | **专业** | **考核排名** | **是否同意转专业** | **拟转入班级** |
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备注：按拟转入专业分类、按考核排名排序。