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| **学校审批意见** | 附件：  **福州软件职业技术学院终身教育学习报名表**  填表时间： 年 月 日   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **姓名** |  | **性别** | |  | **一寸**  **照片** | | **身份证号码** |  | | | | | **家庭住址** |  | | | | | **学号** |  | | **年级** | |  | | **专业** |  | | **班级** | |  | | **电子邮箱** |  | | **联系电话** | |  | | **工作单位或合作企业** |  | | | | | | **课程信息** | **开课学院：** | | | | | | **课程名称：** | | | | | | **学分： 学时： 任课教师：** | | | | | | **上课时间： 上课地点:** | | | | | | **二级教学单位审批意见** |  | | | | | | **教务科研处**  **审批意见** |  | | | | | |