附4：

2023年武进区初中学业水平测试体育考试

免、缓、减试、往届回考生汇总表

学校盖章：

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| **毕业学校** | **准考证号** | **姓 名** | **性别** | **照顾原因** | **照顾类别** | **处理意见** | **备注** |
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注：**先填免、缓、减试后再填往届回考生**。以上考生学校必须在校内张榜公布一周，并将张榜公布材料于**4月21日**上交。

经办人： 联系电话：

2023年武进区初中学业水平测试体育考试

免、缓、减试、往届回考生复查表

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| 姓 名 | | |  | | | | 性别 | |  | | | 年龄 | |  | | 组次／序号 | | |  | |
| 毕业学校 | | |  | | | | | | 准考证号码 | | |  | | | | | | | | |
| 出具证明单位 | | | | |  | | | | | | | | | | | | | | | |
| 免试  项目 |  | | | 减试项目 | |  | | 缓试  项目 | |  | 改试  项目 | |  | | 降标  项目 | |  | 小年龄核定 | | 年  月  日 |
| 毕业学校  审批意见 | | | 单位（盖章）签字： | | | | | | | | | | | | | | | | | |
| 复  查  结  果 | | 复查人（签字）： | | | | | | | | | | | | | | | | | | |
| 领导小组  审批意见 | | | 组 长（签字）： | | | | | | | | | | | | | | | | | |

注：

1.个人申请书及医院证明附贴表后。

2.“毕业学校审批意见”一栏，必须由校长签字，学校盖章，否则不予审批。

3.此表于**4月21日**复查时带来。