附件4

浙江师范大学行知学院2017年全日制本科学生转专业考核安排

**分院（盖章）: 填报人（签名）:**

| **序号** | **专 业** | **考核形式** | **考核**  **人数** | **考核地点** | **考核时间** |
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**注：考核采用面试形式的分院，需制定面试规则，并与此表格一同上报**。