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| 西南科技大学成人教育学院 级学生缴费明细表 | | | | | | | | | | | | | | | | |
| 校外站点（盖章）： 经办人： 联系电话： 上报时间： | | | | | | | | | | | | | | | | |
| 序号 | 学号 | 报名号 | 姓名 | 性别 | 出生  日期 | 身份证号 | 民族 | 专业名称 | 培养  层次 | 学习  形式 | 学制 | 就读  班级 | 收费  标准 | 应交比例标准 | 实际  交费 | 备 注 |
| 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 8 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 10 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 14 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 15 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 16 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

注：该表电子稿在缴费的同时发送至成人教育科负责审核费用人员处。 联系电话：0816-6089264