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| 浙江东方职业技术学院学生学费减免申请表 | | | | | | | | | | | | | | | | | | |
| **学生基本情况** | 姓名 |  | | | | | 性别 | |  | | 出生年月 | | | |  | 民族 | |  |
| 籍贯 |  | | | | | 院系 | |  | | 专业及班级 | | | |  | | | |
| 身份证号码 | | |  | | | | | | | | | | | 学号 |  | | |
| 家庭地址 | | |  | | | | | | | | 联系方式 | | |  | | | |
| 申请学费涉及学年 | | |  | | | | | | | | 申请减免金额 | | |  | | | |
| **家庭成员信息** | 姓名 | | 称谓 | | | 工作（学习）单位 | | | | | | 联系方式 | | | | | | |
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| **家庭经济情况** | 家庭人口总数 | | | |  | | | 家庭月收入 | |  | | | 收入来源 | | | |  | |
| **申请减免原因（请附相关证明材料）** | 本人签字：  日期: | | | | | | | | | | | | | | | | | |
| **本学年受资助情况** |  | | | | | | | | | | | | | | | | | |
| **学院意见** | 签字盖章：  年 月 日 | | | | | | | **学生处意见** | 签字盖章：  年 月 日 | | | | **分管院长意见** | 签字盖章：  年 月 日 | | | | |