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| **姓名** |  | **学号** |  |
| **电话** |  | **邮箱** |  |
| **原方向院系** |  | **原专业** |  |
| **新方向院系** |  | **新专业** |  |
| **申请理由** |
|  |
|  | **学生签字：****申请时间：**  |

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