

昆明医科大学外国留学生退学申请表 (2022 年修)

Application Form for Withdrawal from Kunming Medical University

护照姓名 Name		护照号 Passport Number		国籍 Nationality	
学号 Student ID No.		所在学院及班级 School & Class		联系电话 Tel	
申请退学事由 Reasons for Voluntary Withdrawal	签字 Signature: 申请日期 Date of Application:				
家长或监护人意见 Decision of The parents or legal guardians	签字 Signature: 日期 Date:				
导师/班主任意见 Decision of supervisor & coordinator	签字 Signature: 日期 Date:				
二级学院学办意见 Decision of The Section of Student Affairs	签字(盖章) Signature (seal) : 日期 Date:				
二级学院教学办意见 Decision of The Section of Teaching Affair	签字(盖章) Signature (seal) : 日期 Date:				