**祁存谦奖学金申请审批表**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 姓 名 | |  | | 性 别 |  | 出生年月 | |  | | 民族 |  |
| 年 级 | |  | | | | | 博士/硕士 | |  | | |
| 专 业 | |  | | | | | 学 号 | |  | | |
| 联系电话 | |  | | | | | 导 师 | |  | | |
| 通讯地址 | | |  | | | | 电子邮箱 | |  | | |
| 课程成绩 (请附成绩单，新生除外) | | | | | | | | | | | |
| 申请理由 |  | | | | | | | | | | |
| 导师意见 | 签名： 日期： | | | | | | | | | | |
| 学院意见 | （公章） 日期： | | | | | | | | | | |