附件3

**乐山师范学院高等教育自学考试转成人高等教育**

**课程成绩认定通知单**

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| 姓名 |  | 性别 |  | 身份证号码 | |  | | |
| 学号 |  | 年级 |  | 专业名称 |  | | 学历层次 |  |
| 成人高等教育课程名称 | | | | 成绩 | | | 学分 | |
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**乐山师范学院继续教育学院**

**年 月 日**