附件3

**广东省2017年下半年非学历（行业）证书**

**考试考生成绩复查申请汇总表**

**单位名称（盖章）： 考试项目：**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **序号** | **课程代号** | **课程名称** | **准考证号** | **姓名** | **原分数** |
| 1 |  |  |  |  |  |
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注：1.请项目负责单位于2018年3月8日17:00前连同考生成绩申请表报送我院社会考试处，逾期不予受理。

2.根据教育部考试中心相关规定，任何机构或单位不得向考生收取任何关于复

查分数的费用。