附件1

衡阳师范学院乡村教师公费定向培养补充协议签订情况汇总表

学院（盖章）： 经办人： 负责人： 填报时间： 年 月 日

| 序号 | 市州 | 县市区 | 姓名 | 性别 | 身份证号 | 学院 | 专业名称 | 学制 | 入学年份 | 毕业年份 | 学号 | 备注 |
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注：此表用excel制作。