附件1：

**北京印刷学院学生学业辅导预约单**

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| **学号** |  | **姓名** |  | **学院** | |  | **专业** |  |
| **班级** |  | **联系方式** | **手机** | |  | | | |
| **邮箱** | |  | | | |
| **学业**  **现状** |  | | | | | | | |
| **辅导**  **需求**  **内容** |  | | | | | | | |
| **辅导**  **教师**  **需求** | **专业：**  **其他：** | | | | | | | |
| **辅导**  **安排** | **辅导教师：**  **辅导时间：**  **辅导地点：**  **学业辅导办公室**  **年  月  日** | | | | | | | |