**校庆系列活动学院参与反馈表**

学院（盖章）：

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **序号** | **活动名称** | **参加总人数** | **参与班级及人数** | **责任人** | **联系电话** |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |

9月13日上午9点前上报。