

# Hunan City University Make-Up Examination Results Record Table

school year:

school term:

course title:

Teachers name:

order number	Student ID	surname and personal name	classes and grades in school	specialty	mark	remarks
1						

Teachers signature: Signature of the director of the teaching and Research Office: Course assessment time:

Note: This form shall be submitted to the Academic Affairs Office of the School (department) after the completion of the course assessment.