**《国家学生体质健康标准》成绩勘误表**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **姓名** |  | **班级** |  | **学号** |  | **身份证号码** |  | **体育测试老师及上课时间** |  | **联系方式** |  |
| **错误项目**  **及原因** | |  | | | | | | | | | |
| **正确成绩** | |  | | | | | | | | | |

**签名：**

**年 月 日**

**备注：1、成绩勘误截止日期16周周五。**

**2、勘误表交到体育馆二楼208室李老师。**