附件

考生学习、演出情况调查表

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| **所学剧目** | | | | | |
| 剧目 | 指导教师 | | 剧目 | 指导教师 | |
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| **演出情况** | | | | | |
| 剧目 | 角色 | 场次 | 剧目 | 角色 | 场次 |
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推荐单位领导签名： 推荐单位公章：

年 月 日