附件4

东莞市2024年进城务工人员随迁子女资格审核汇总表

学校名称（公章）：

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 序号 | 考生号 | 身份证号码 | 考生姓名 | 备注 |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

填表人： 联系电话：