**广州市新穗学校2019-2020学年度招生申报表**

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| 姓名 | | | |  | | | | | | | | | 曾用名 | | | | | | |  | | | | | | | 出生日期 | | | | | | | | | | | 年 月 日 | | | | | | | | | | | | | 免  冠  一  寸  照  片 | | | | | | | | | |
| 体重 | | | | kg | | | | | | | | | 身高 | | | | | | | cm | | | | | | | 现户籍  所在地 | | | | | | | | | | | **（须提供户籍复印件证明材料）** | | | | | | | | | | | | |
| 血型 | | | |  | | | | | | | | | 民族 | | | | | | | 族 | | | | | | |
| 现就读学校 | | | | | | （广州市 区） 学校　 　　年级　 　班 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 家庭住址 | | | | | | 详细地址：广州市 区 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 所属街道：　　　　　 　街 | | | | | | | | | | | | | | | | | | | | | | | | | 所属派出所：　　　　　　派出所 | | | | | | | | | | | | | | | | | | | |
| 邮编：　　　　　　　　　　　家庭电话： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 身份证号码 | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | 学籍号 | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| **学 生 家 庭 与 监 护 人 信 息** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 称谓 | | | 姓名 | | | | | | | | | 工作单位 | | | | | | | | | | | | | | | | | | | | 职业 | | | | | | | 文化程度 | | | | | | | 固定电话 | | | | | | 手机 | | | | | | | | |
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| 家庭  结构 | 完整家庭 | | | | **离异单亲** | | | | | | | | | | | | | | | | | | | **离异重组** | | | | | | | | **父母亡故** | | | | | | | | | | | | | | | | **遗弃** | | | | | | | | | | |  | |
| 单亲随父 | | | | | 单亲随母 | | | | | | 单亲随祖父母 | | | 单亲随外祖父母 | | | | | 随父重组 | | | | 随母重组 | | | | 父亡随母 | | | | | | | 母亡随父 | | | | 父母双亡 | | | | | 遗弃随父亲家族成员生活 | | 遗弃随母亲家族成员生活 | | | | | 孤儿院等社会福利机构 | | | **与何人住一起生活** | | |
|  | | | |  | | | | |  | | | | | |  | | |  | | | | |  | | | |  | | | |  | | | | | | |  | | | |  | | | | |  | |  | | | | |  | | |  | | |
| **学 生 健 康 状 况** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 有否经常性犯病情况（2次/月）？ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 有□　否□ | | | | | | | | | | 如果有，请说明患何病 | | | | | | | | | | | | |  | | | | | | | |
| 有否家族遗传病？或者曾患传染病？（肝炎、肺结核） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 有□　否□ | | | | | | | | | | 如果有，请说明患何病 | | | | | | | | | | | | |  | | | | | | | |
| 有否患过严重疾病？（肝炎、心脏病、肾炎、地中海贫血、G—6PD缺乏症、严重的胃病） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 有□　否□ | | | | | | | | | | 如果有，请说明患何病 | | | | | | | | | | | | |  | | | | | | | |
| 有否受过严重的外伤？（骨折、脑外科、肝脾破裂） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 有□　否□ | | | | | | | | | | 如果有，请说明 | | | | | | | | | | | | |  | | | | | | | |
| 有否动过外科手术？ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 有□　否□ | | | | | | | | | | 如果有，请说明 | | | | | | | | | | | | |  | | | | | | | |
| 有否到心理门诊治疗（心理障碍、儿童多动症、精神发育迟缓、精神分裂症、自闭症）？ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 有□　否□ | | | | | | | | | | 如有，诊断为何心理疾患？ | | | | | | | | | | | | |  | | | | | | | |
| 有否有药物过敏史？ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 有□　否□ | | | | | | | | | | 如有，对何药物过敏？ | | | | | | | | | | | | |  | | | | | | | |
| 有否患皮肤病（癣症、性病、红斑狼疮等）？ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 有□　否□ | | | | | | | | | | 如有，请说明患何皮肤病？ | | | | | | | | | | | | |  | | | | | | | |
| 有无出现过过激行为（如：自伤，自杀等） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 有□　否□ | | | | | | | | | | 如果有，请说明 | | | | | | | | | | | | |  | | | | | | | |
| 孩子出生时情况：① 顺产□ 钳产□ 剖宫产□ 早产□  ② 产时有没有曾窒息？ 有□　否□  ③ 产后一个月内孩子有没有住院？ 有□　否□，如果有，请说明： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 关于学生身体状况其他需要说明的 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **学 生 在 校 情 况** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 现就读校详细地址与邮编 | | | | | | | 详细地址：广州市 区  邮编： 教导处电话： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 现班主任 | | | | | | | |  | | | | | | | | | | 联系方式 | | | | | | | | 座机 | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| 手机 | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| 现德育主任 | | | | | | | |  | | | | | | | | | | 联系  方式 | | | | | | | | 座机 | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| 手机 | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| 学生毕业小学 | | | | | | | | （广州市 区） 小学； 小学毕业成绩；语文 数学 英语 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **学 生 基 本 表 现** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 学生主要优点长处： | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 学生与他人交往情况： | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 学生与师生及家长关系情况： | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 学生不良行为习惯：如迟到、早退、逃学、旷课 | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 学生学习状态(成绩水平、课堂习惯、注意力) | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 学生学年度成绩  **（请附学籍材料复印件）** | | | | | | | | | | | | | | | | | 初一级 | | | | | | | | | | | | | | | | | | | | | | | | | | | 初二级 | | | | | | | | | | | | | | | | |
| 语文 | | | | | | | | 数学 | | | | | | | | | | 英语 | | | | | | | | | 语文 | | | | | 数学 | | | | | | | | 英语 | | | |
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| 该生在校期间所有受到的处分  **（请附处分材料复印件）** | | | | | | | | | | | | | | | | | 时间 | | | | | | | | 处分等级 | | | | | | | | | | | | 受处分事由 | | | | | | | | | | | | | | | | | | | 处理决定文号 | | | | |
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| 填写学生资料负责人签章 | | | | | | | | 2019年　月　 日 | | | | | | | | | | | | | | | | | 联系  方式 | | | | | | | | | | | | 座机 | | | | |  | | | | | | | | | | | | | | | | | | |
| 手机 | | | | |  | | | | | | | | | | | | | | | | | | |
| **问题行为及罪错记录** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 抽烟 | |  | | | 赌博 | | | |  | | | | | | 偷（盗）窃 | | | | | |  | 团体斗殴 | | | | | | | |  | | | 打机成瘾 | | | | | | | |  | | | | 调戏异性 | | | | | | |  | | 夜不归家 | | | | | |  |
| 酗酒 | |  | | | 旷课 | | | |  | | | | | | 长期休学 | | | | | |  | 参与帮派 | | | | | | | |  | | | 离家出走 | | | | | | | |  | | | | 过早性行为 | | | | | | |  | | 其他 | | | | | |  |
| 说谎 | |  | | | 勒索 | | | |  | | | | | | 打架伤人 | | | | | |  | 打骂师长 | | | | | | | |  | | | 破坏公物 | | | | | | | |  | | | | 接触淫秽品 | | | | | | |  | |  | | | | | |  |
| **对于送该生到新穗学校就读的意见** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **监护人**对送孩子到新穗学校就读的意见：  监护人（签名）：    2019年　月　日 | | | | | | | | | | | | | | **同校送生报名≥2人时填写** | | | | | | | | | **学校**对送该生到新穗学校就读的意见：  负责人（签名）：  学校签章  2019年　　月 日 | | | | | | | | | | | | | | | | | | | | | | | | **学校所在区教育行政部门**对送该生到新穗学校就读的意见：  负责人（签名）：  学校所在区教育行政部门签章  2019年　　月 日 | | | | | | | | | | | | | |
| **排位**  学校希望新穗招生录取时，该生录取排位在本校送生中排  **第 顺位** | | | | | | | | |

**（本表正反2面，请如实填写，集中招录请在2019年6月14日前、**

**空余学位补录请在每月10日前送达广州市新穗学校，地址：广州市海珠区石榴岗路15号）**