**附件：**

**考生退费申请表**

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| --- | --- | --- | --- |
| **姓 名** |  | **身份证号** |  |
| **准考证号** |  | **考点名称** |  |
| **报考职位** |  | | |
| **考前14天的旅、居地（具体到省、市、县（市、区）和街道）** |  | | |
| **旅、居地疫情风险等级** | **□高风险 □中风险 □低风险** | | |
| **申**  **请**  **退**  **费**  **原**  **因** |  | | |