**考生听力试听记录表**

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| **拷场名称** | **试听情况（请在对应的情况下画√）** | | **试听考生签字** | **故障处理人员填写** | |
| 例： | 正常 | 有杂音或听不清等 | （试听考生签字） | 故障是否处理（是/否） | 处理人员签字 |
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| 3130 |  |  |  |  |  |
| 3128 |  |  |  |  |  |
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