|  |  |  |
| --- | --- | --- |
| **日期** | **加分項目** | **教師姓名/職編** |
|  | **□戒菸轉介: 人**   |  |  |  |  | | --- | --- | --- | --- | | **班級** | **學號** | **姓名** | **手機** | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |
| **日期** | **加分項目** | **教師姓名/職編** |
|  | **□緊急傷病轉介: 人**  **班級: 學號:**  **姓名:**  **請簡述傷病處理及輔導經過:** |  |