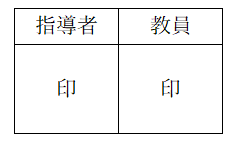
No.

経過記録

　　月　　日（　　）学籍番号：　　　　　　氏名：

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| 日付 | 問題＃ | 実施結果・評価 |
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