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| **ESCOLA TÉCNICA ESTADUAL "ADOLPHO BEREZIN" - MONGAGUÁ - 107** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **RM:\_\_\_\_\_\_\_\_\_\_\_\_ REQUERIMENTO GERAL** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  |  |
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| ENDEREÇO | | | |  | |  | |  | |  | | |  | |  | |  | | CIDADE | | | |  |  | | |  | |  | |  |  | | | |  |  |
| E-MAIL | | | |  | | | | | | | | |  | |  | |  | |  | TELEFONE | | | |  | | |  | |  | |  |  | | | |  |  |
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| Ilmo Senhor Diretor da ETEC "Adolpho Berezin" | | | | | | | | | | | | | | | | |  | |  |  | | |  |  | | |  | |  | |  |  | | | |  |  |
| Venho respeitosamente requerer de Vossa Senhoria: | | | | | | | | | | | | | | | | | | |  |  | | |  |  | | |  | |  | |  |  | | | |  |  |
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| 1. ( ) Destrancamento de matrícula; | | | | | | | | | | | | |  | |  | |  | |  |  | | |  |  | | |  | |  | |  |  | | | |  |  |
| 2. ( ) Justificativa de faltas (Anexar Documentos); | | | | | | | | | | | | | | | | |  | |  |  | | |  |  | | |  | |  | |  |  | | | |  |  |
| 3. ( ) Prova Substitutiva - Data: | | | | | | | | | |  | | |  | |  | |  | |  | Prof. | | |  |  | | |  | |  | |  |  | | | |  |  |
| Disciplina: | | | |  | |  | |  | |  | | |  | |  | |  | |  |  | | |  |  | | |  | |  | |  |  | | | |  |  |
| 4. ( ) Solicitação de retorno ao curso por Evasão/outros (motivo); | | | | | | | | | | | | | | | | | | |  |  | | |  |  | | |  | |  | |  |  | | | |  |  |
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| 5. ( ) Solicitação de vaga via transferência: ETEC | | | | | | | | | | | | | | |  | |  | |  |  | | |  |  | | |  | |  | |  |  | | | |  |  |
| Cidade: | |  | |  | |  | |  | |  | | |  | |  | |  | |  |  | | |  | módulo: | | | | |  | |  |  | | | |  |  |
| Curso: | |  | |  | |  | |  | |  | | |  | |  | |  | |  |  | | |  |  | | |  | |  | |  |  | | | |  |  |
| 6. ( ) Sugestões / Críticas / Elogios. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |
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| Data: \_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_ | | | | | | | | | | |  | Assinatura do Requerente ou Responsável | | | | | | | | | | | | | | | | | | | | | |  |
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| Protocolo nº \_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | |  | DESPACHO: ( ) DEFIRO ( ) INDEFIRO | | | | | | | | | | | | | | | | | | | | | |  |
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| Funcionário | | | | | | | | | | |  |  | | | | | | | | | | | | | | | | | | | | | |  |
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