# Зявление на участие в ЕГЭ

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|  | Начальнику управления образования АМО ГО «Сыктывкар»О.Ю. Бригида |
| **Заявление** |
| **Я,** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

*фамилия*

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*имя*

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| **Дата рождения**: | ч | ч | . | м | м | . |  |  | г | г |

*отчество*

**Документ, удостоверяющий личность** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Серия** |  |  |  |  | **Номер** |  |  |  |  |  |  |  |  |  |  |

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| **Пол**: |  | Мужской |  | Женский, |

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**СНИЛС**

Прошу зарегистрировать меня для участия в ЕГЭ в дополнительный (сентябрьский) срок по следующим учебным предметам:

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| **Наименование учебного предмета** | **Отметка о выборе** |
| Русский язык |  |
| Математика (базовый уровень) |  |
| Математика (профильный уровень) |  |

Прошу создать условия для сдачи ЕГЭ с учетом состояния здоровья, подтверждаемого:

*(указать необходимые условия)*

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| Справкой об установлении инвалидности |  | Рекомендациями ПМПК |  |

Согласие на обработку персональных данных прилагается.

Подпись заявителя \_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Ф.И.О.)

 «\_\_\_\_» \_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_ г.

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| Контактный телефон |  | ( |  |  |  | ) |  |  |  | - |  |  | - |  |  |
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Регистрационный номер