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|  | | | | | | | | | | | | Руководителю    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  наименование ОО  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Ф.И.О. руководителя) | | | | | | | | | | | | | | |
| **ЗАЯВЛЕНИЕ** | | | | | | | | | | | | | |
| **Я,** |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |

*фамилия*

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*имя*

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

*отчество*

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

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

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| **Пол**: |  | мужской |  | женский |

Прошу зарегистрировать меня для участия в итоговом собеседовании по русскому языку\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

(дата проведения)

Прошу создать условия для прохождения итогового собеседования по русскому языку, учитывающие состояние здоровья, особенности психофизического развития:

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*(указать необходимые условия/материально-техническое оснащение, учитывающие состояние здоровья,   
особенности психофизического развития и др.)*

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|  | Увеличение продолжительности итогового собеседования по русскому языку  на 30 минут |

Основание:

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| Справка об установлении инвалидности |  | Рекомендации  ПМПК |  |

Согласие на обработку персональных данных прилагается. С Порядком проведения итогового собеседования ознакомлен(на)

Подпись заявителя \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/

(Ф.И.О.)

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

С заявлением ознакомлен (а)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/

*Подпись ФИО родителя (законного представителя)*

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Контактный телефон

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Регистрационный номер