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|  | | | | | | | | | | | | | | | | | Директору \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *(наименование ОО)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *Ф.И.О. директора* | | | | | | | | | |
| **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 |

прошу зарегистрировать меня для участия в ГИА-9 по следующим общеобразовательным предметам:

|  |  |  |
| --- | --- | --- |
| **Наименование предмета** | **Отметка о выборе** | **Выбор сроков (досрочный этап, основной этап, дополнительный этап[[1]](#footnote-1)\*)** |
| Русский язык |  |  |
| Математика |  |  |
| Физика |  |  |
| Химия |  |  |
| Информатика и ИКТ |  |  |
| Биология |  |  |
| История |  |  |
| География |  |  |
| Английский язык |  |  |
| Французский язык |  |  |
| Немецкий язык |  |  |
| Обществознание |  |  |
| Литература |  |  |
| Родной язык (указать какой) |  |  |
| Родная литература |  |  |

Прошу создать условия для сдачи ГИА-9 с учетом состояния здоровья, подтверждаемого:

*(указать необходимые условия)*

|  |  |  |  |
| --- | --- | --- | --- |
| Справкой об установлении инвалидности |  | Рекомендациями ПМПК |  |

Согласие на обработку персональных данных прилагается.

Об отсутствии права изменения выбора предмета для ГИА-9 после 01 марта проинформирован(а).

Дата подачи заявления «\_\_\_» \_\_\_\_\_\_\_\_\_\_\_\_201\_ г. \_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/

дата подпись участника ГИА /расшифровка подписи/

Я, **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**, с выбором предметов и форм прохождения государственной (итоговой) аттестации сына /дочери **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_согласен (а).

«\_\_\_» \_\_\_\_\_\_\_\_\_\_\_\_201\_ г. \_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/

дата подпись родителя /расшифровка подписи/

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

1. [↑](#footnote-ref-1)