Форма заявления на участие в итоговом сочинении (изложении)

выпускника текущего учебного года

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|  | | | | | | | | | | | | Руководителю  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  наименование ОО  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Ф.И.О. руководителя) | | | | | | | | | | | | | | |
| **заявление** | | | | | | | | | | | | | |
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*фамилия*

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*отчество*

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

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

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

Прошу зарегистрировать меня для участия в итоговом

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| **сочинении** |  | **изложении** |  |  |

для получения допуска к государственной итоговой аттестации по образовательным программам среднего общего образования.

Прошу создать условия, учитывающие состояние здоровья, особенности психофизического развития, для написания итогового сочинения (изложения):

*(указать необходимые условия/материально-техническое оснащение, учитывающие состояние здоровья, особенности психофизического развития, сдача итогового сочинения (изложения) в устной форме по медицинским показаниям и др.)*

Основание:

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| Справка об установлении инвалидности |  | Рекомендации ПМПК |  |

Согласие на обработку персональных данных прилагается.

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

(Ф.И.О.)

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| Контактный телефон |  | ( |  |  |  | ) |  |  |  | - |  |  | - |  |  |

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

*подпись родителя (законного представителя)*

Форма заявления на участие в итоговом сочинении выпускника прошлых лет

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|  | | | | | | | | | | | | Руководителю Департамента образования Орловской области,  председателю ГЭК Орловской области  Т. А. Шевцовой | | | | | | | | | | | | | | |
| **заявление** | | | | | | | | | | | | | |
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*фамилия*

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*отчество*

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

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

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

Прошу зарегистрировать меня для участия в итоговом сочинении \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*(указать дату участия в итоговом сочинении в соответствии   
с расписанием итогового сочинения)* для использования его результатов при приеме   
в образовательные организации высшего образования.

Прошу создать условия, учитывающие состояние здоровья, особенности психофизического развития, для написания итогового сочинения (изложения):

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

Основание:

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| Справка об установлении инвалидности |  | Рекомендации ПМПК |  |

Согласие на обработку персональных данных прилагается.

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

(Ф.И.О.)

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| Контактный телефон |  | ( |  |  |  | ) |  |  |  | - |  |  | - |  |  |

Форма заявления на участие в итоговом сочинении обучающегося профессиональной образовательной организации

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| **заявление** | | | | | | | | | | | | | |
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*отчество*

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

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

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

**Наименование ПОО \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

(Ф.И.О.)

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

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| Контактный телефон |  | ( |  |  |  | ) |  |  |  | - |  |  | - |  |  |