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|  | Руководителю образовательной организации\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Заявление об участии в итоговом сочинении (изложении)** |
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*(фамилия)*

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 *(имя)*

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*(отчество)*

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 *(дата рождения)*

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 *(контактный телефон)*

Наименование документа, удостоверяющего личность: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Реквизиты документа, удостоверяющего 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 итоговом

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

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

Прошу организовать проведение итогового сочинения (изложения) в условиях, учитывающих состояние моего здоровья, особенности психофизического развития, подтверждаемые:

оригиналом или надлежащим образом заверенной копией рекомендаций ПМПК

оригиналом или надлежащим образом заверенной копией справки, подтверждающей

факт установления инвалидности, выданной ФГУ МСЭ

Необходимые условия проведения итогового сочинения (изложения):

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C Памяткой о порядке проведения итогового сочинения (изложения) ознакомлен (-а)

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

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

Подпись родителя (законного представителя) несовершеннолетнего участника итогового сочинения (изложения) \_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Ф.И.О.)

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

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Регистрационный номер