Заявление на участие в итоговом сочинении (изложении)

выпускника текущего учебного года

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|  | Руководителю МБОУ СОШ №17Шкондиной О.И. |
| **Заявление** |
| **Я,** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

*фамилия*

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*имя*

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| **Дата рождения**:  |  |  | . |  |  | . |  |  |  |  |

*отчество*

**Наименование документа, удостоверяющего 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) подтверждаемого:

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|  | оригиналом или надлежащим образом заверенной копией рекомендаций психолого-медико-педагогической комиссии |

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|  | оригиналом или надлежащим образом заверенной копией справки, подтверждающей факт установления инвалидности, выданной федеральным государственным учреждением медико-социальной экспертизы |

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*Указать дополнительные условия, учитывающие состояние здоровья, особенности психофизического развития*

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|  | увеличение продолжительности написания итогового сочинения (изложения) на 1,5 часа |

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*(иные дополнительные условия/материально-техническое оснащение, учитывающие состояние*

 *здоровья, особенности психофизического развития, сдача итогового сочинения (изложения)в устной*

*форме по медицинским показаниям и др.)*

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

Подпись заявителя \_\_\_\_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(ФИО)

Подпись родителя (законного представителя) \_\_\_\_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(ФИО)

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

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Контактный телефон

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Регистрационный номер