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| **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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Прошу зарегистрировать меня для участия в итоговом сочинении (отметить дату участия в итоговом сочинении):

в первую среду декабря;

 в первую среду февраля;

 во вторую среду апреля

для использования его при приеме в образовательные организации высшего образования.

Прошу организовать проведение итогового сочинения в условиях, учитывающих состояние моего здоровья, особенности психофизического развития, подтверждаемого:

 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:

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

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

 «\_\_\_\_» \_\_\_\_\_\_\_\_\_\_\_\_\_ 202\_\_ г.

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| Регистрационный номер |  |  |  |  |  |  |  |  |  |  |  |  |