**Заявление обучающегося для участия в итоговом сочинении (изложении)**

Руководителю ОО

(наименование образовательной организации)

Ф.И.О. руководителя ОО

**Заявление**

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*фамилия*

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*имя*

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*отчество*

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

**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** |  |
| **04.12.2024**  |  | **05.02.2025**  |  | **09.04.2025** |  |

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

Прошу создать условия для сдачи итогового сочинения (изложения) с учетом состояния здоровья, подтверждаемого:

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| Справкой об установлении инвалидности |  | Рекомендациями ПМПК |  |

Согласие на обработку персональных данных прилагается.

Подпись заявителя / (Ф.И.О.)

«\_\_\_» \_\_\_\_\_\_\_\_\_\_\_\_20\_\_\_г.

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 Контактный телефон

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Регистрационный номер