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|  | *Директору МБОУ Лицей №4*  *Ю.Г. Чижову* |

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| **заявление** | | | | | | | | | | | |
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*фамилия*

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

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

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| **СНИЛС** |  |  |  |  |  |  |  |  |  |  |  |

прошу зарегистрировать меня для участия в государственной итоговой аттестации **в форме**

единого государственного экзамена государственного выпускного экзамена

по следующим общеобразовательным предметам:

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| **Наименование предмета** |  | **Дата/срок** | **Наименование предмета** |  | **Дата/срок** |
| Русский язык |  |  | Обществознание |  |  |
| Математика (базовый уровень) |  |  | Английский язык |  |  |
| Математика (профильный уровень) |  |  | Английский язык устный |  |  |
| Физика |  |  | Немецкий язык |  |  |
| Химия |  |  | Немецкий язык устный |  |  |
| Информатика и ИКТ |  |  | Французский язык |  |  |
| Биология |  |  | Французский язык устный |  |  |
| История России |  |  | Испанский язык |  |  |
| География |  |  | Испанский язык устный |  |  |
| Литература |  |  |  |  |  |

Прошу создать условия для сдачи ГИА с учетом состояния здоровья, подтверждаемого:

справкой об установлении инвалидности рекомендациями ПМПК г. Москвы

Согласие на обработку персональных данных прилагается.

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

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

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