**Дополнительное заявление**

Председателю

Государственной экзаменационной

комиссии Республики Крым

Лаврик В.В.

**ЗАЯВЛЕНИЕ**

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*фамилия*

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*имя*

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*отчество*

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| Контактный телефон: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Категория участника: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_класс\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Наименование образовательной организации\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Прошу изменить мне ранее выбранный перечень экзаменов ГИА:

**добавить** экзамены по предметам:

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|  | наименование предмета |  |
|  | наименование предмета |  |
|  | наименование предмета |  |

**удалить** экзамены по предметам:

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|  | наименование предмета |  |
|  | наименование предмета |  |
|  | наименование предмета |  |

Изменение перечня ранее выбранных предметов производится по причине

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| Документ (ы), подтверждающие наличие уважительной причины, прилагаются: |
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| Подпись заявителя \_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Ф.И.О.) «\_\_\_\_» \_\_\_\_\_\_\_20\_\_\_ г.  Регистрационный номер \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |