Министру образования Республики Башкортостан А.С.Гаязову

ЗАЯВЛЕНИЕ

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Паспорт: серия \_\_\_\_\_\_\_\_\_\_\_\_№\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ выдан \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Год рождения: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Адрес регистрации: *индекс* \_\_\_\_\_\_\_\_\_\_, *район, нас.пункт* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

*ул.* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, *д.* \_\_\_\_\_\_\_\_\_\_\_, *кв.*\_\_\_\_\_\_

Адрес фактического проживания: *индекс* \_\_\_\_\_\_\_\_, *район, нас.пункт* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

*ул.* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, *д.* \_\_\_\_\_\_\_\_\_\_\_, *кв.*\_\_\_\_\_\_

Контактный сотовый телефон \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Прошу аккредитовать меня в качестве общественного наблюдателя при проведении государственной итоговой аттестации в 2015 году на экзамены по учебным предметам:

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| Дата экзамена / предмет | Наименование / код ППЭ |
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С порядком проведения государственной итоговой аттестации ознакомлен (а).

С правами и обязанностями общественных наблюдателей ознакомлен (а).

Подтверждаю, что мои близкие родственники (дети, внуки, племянники) в государственной итоговой аттестации в 2015 году,

 на территории \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ участвуют / не участвуют.

 (указать муниципальное образование) (нужное подчеркнуть)

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(в случае если участвуют, указать в какой общеобразовательной организации обучаются)

Согласен (-на) на обработку персональных данных сроком на один год с целью формирования базы экспертов по мониторингу проведения государственной итоговой аттестации в 2015 году

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ «\_\_\_\_\_\_»\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_2015 г.

 (Ф.И.О. заявителя) (Подпись)

Заявление принял:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ «\_\_\_\_\_\_»\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_2015 г.

 (Ф.И.О. лица, принявшего заявление) (Подпись)

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|  **Регистрационный номер** |  |  |  |  |  |