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|  | Приложение 2 к приказу  Департамента образования Ярославской области  от № |

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| Председателю ГЭК ГИА-9 Ярославской области |

**ЗАЯВЛЕНИЕ**

**об изменении перечня предметов**

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*фамилия*

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*отчество*

обучающийся (-аяся) 9 «\_\_\_\_» класса \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*наименование образовательной организации*

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| дата рождения: | | | | |  | |  | . | |  | |  | . | |  | |  |  |  | |  | | |  | | |  | | |  | | пол: | | | | | | |  | |  | |  | |  | | |
|  |  |  |  |  | | *число* | | |  | | *месяц* | | |  | | *год* | | | |  | | |  | | |  | | |  | | | |  | |  | |  | | **М** | |  | | **Ж** | |  | | |
| документ, удостоверяющий личность: | | | | | | | | | | | | | |  | | | | | | | |  | | |  | | |  | | |  | | |  | |  | |  | |  | |  | |  | |  |  |
| *тип документа серия номер* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

прошу изменить перечень учебных предметов по выбору для прохождения ГИА-9, заявленный мной в срок до 01 марта 2017 года *(отметить нужный пункт знаком «Х»)*

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| Предмет | | Заявленный перечень предметов | | | | Измененный перечень предметов | | |
| в досрочный период | | в основной период | в дополнительный период | в досрочный период | в основной период | в дополнительный период |
| Физика | |  | |  |  |  |  |  |
| Химия | |  | |  |  |  |  |  |
| Информатика и ИКТ | |  | |  |  |  |  |  |
| Биология | |  | |  |  |  |  |  |
| История | |  | |  |  |  |  |  |
| География | |  | |  |  |  |  |  |
| Английский язык | |  | |  |  |  |  |  |
| Немецкий язык | |  | |  |  |  |  |  |
| Французский язык | |  | |  |  |  |  |  |
| Испанский язык | |  | |  |  |  |  |  |
| Обществознание | |  | |  |  |  |  |  |
| Литература | |  | |  |  |  |  |  |
| в связи с наличием уважительной причины (*указать причину*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ . | | | | | | | | | |
|  | | | | | | | | | |
| К заявлению прилагаются (перечислить) документы (заверенные копии документов), подтверждающие уважительную(ые) причину(ы)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
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«\_\_\_»\_\_\_\_\_\_\_\_\_\_\_ 201\_\_ г. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ /

*число подпись обучающегося ФИО*

С заявлением ознакомлен(а) «\_\_\_»\_\_\_\_\_\_\_\_\_201\_\_г. \_\_\_\_\_\_\_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/

*число подпись родителя (законного представителя) ФИО*

Заявление принял \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ /

*должность подпись ФИО*

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| Дата |  |  | . |  |  | . |  |  |  |  |  |  |  | | | | |
|  | *число* | |  | *месяц* | |  |  | *год* | |  |  |  | Регистрационный номер |  |  |  |  |