**NÚMERO DE MATRÍCULA:**

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**NOME COMPLETO DO REQUERENTE**

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**E-MAIL**

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**COMPONENTE CURRICULAR A SER REALIZADO POR LEITURA SUPERVISIONADA:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**JUSTIFICATIVA**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Data: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_ Assinatura: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**SECRETARIA ACADÊMICA**

O pedido foi devidamente analisado e ( ) deferido ( ) indeferido.

Responsável pela análise: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

São Leopoldo, \_\_\_/\_\_\_/\_\_\_ Assinatura da Secretaria:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_