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| **FORMULÁRIO DE RECURSO – PROGRAMA DE MONITORIA****SELEÇÃO DE DISCENTES** |

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| **DADOS PESSOAIS** |
| **Nome completo:** |
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| **RECURSO DO (A) CANDIDATO (A)** |
| Referente à inscrição na disciplina: |
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| Lavras - MG \_\_\_/\_\_\_\_\_/\_\_\_\_\_\_, Assinatura do(a) candidato(a):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **ANÁLISE DO(S) AVALIADOR(ES)** |
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| Assinatura do(s) avaliador(es) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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Lavras, \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_