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|  |  |  |  | Директору МБОУ СОШ № 12 | |  |  |
|  |  |  |  | Богачевой Татьяне Александровне | |  |  |
|  |  |  |  |  | |  |  |
|  |  |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |
|  |  |  |  | (фамилия, имя, отчество полностью заявителя) | |  |  |
|  |  |  |  | сведения о документе, подтверждающем статус законного представителя (№, серия, дата выдачи): | |  |  |
|  |  |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |
|  |  |  |  | тел.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  | **ЗАЯВЛЕНИЕ** | |  |  |  |
|  |  |  |  |  |  |  |  |
|  | Прошу принять \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |  |  |
|  | (фамилия, имя, отчество (последнее - при наличии) ребенка) | | | | |  |  |
|  | дата рождения: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, место рождения: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |  |  |
|  | адрес проживания: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |  |  |
|  | адрес регистрации: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |  |  |
|  |  | в \_\_\_\_ класс. | | | |  |  |
|  |  |  |  |  |  |  |  |
|  | Сведения о родителях(законных представителях) ребенка: | | | | |  |  |
|  |  |  |  |  |  |  |  |
|  | 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. \_\_ | | | | | |  |
|  | (фамилия, имя, отчество (последнее - при наличии), адрес места жительства, контактные телефоны) | | | | |  |  |
|  | 2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. \_\_\_\_\_ | | | | | |  |
|  | (фамилия, имя, отчество (последнее - при наличии), адрес места жительства, контактные телефоны)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |  |  |
|  |  |  |  |  |  |  |  |
|  | Изучал(а) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ язык. | | | | |  |  |
|  |  |  |  |  |  |  |  |
|  | С уставом, с лицензией на осуществление образовательной деятельности, со свидетельством о государственной аккредитации, с образовательными программами и другими документами, регламентирующими организацию и осуществление образовательной деятельности, права и обязанности обучающихся МБОУ СОШ № 12 ознакомлен(а). | | | | |  |  |
|  |  | | | | |  |  |
|  |  |  |  |  |  |  |  |
|  |  | Дата «\_\_\_\_\_\_\_\_»\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_20\_\_\_\_\_\_\_г. | | | Подпись |  |  |