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|  | Приложение 3 к приказу  Департамента образования  Ивановской области  от 12.10.2023 № 1160-о |

**Форма ИС-ВТГ**

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| **З А Я В Л Е Н И Е**  **на участие в итоговом сочинении (изложении)**  **выпускника текущего учебного года** |

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| |  |  | | --- | --- | | Руководителю  образовательной организации  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | **Заявление** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Я,** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   *фамилия*   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   *имя*   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   *отчество*   |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Дата рождения**: | ч | ч | . | м | м | . | г | г | г | г |   **Наименование документа, удостоверяющего личность** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Серия** |  |  |  |  |  |  |  |  |  | **Номер** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **СНИЛС** |  |  |  | - |  |  |  | - |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Пол**: |  | Мужской |  | Женский |   Прошу зарегистрировать меня для участия в итоговом   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **сочинении** |  | **изложении** |  |  |   для получения допуска к государственной итоговой аттестации по образовательным программам среднего общего образования.  Прошу для написания итогового сочинения (изложения) создать условия, учитывающие состояние здоровья, особенности психофизического развития, подтверждаемые:  оригиналом или надлежащим образом заверенной копией рекомендаций психолого-медико-педагогической комиссии  оригиналом или надлежащим образом заверенной копией справки, подтверждающей факт установления инвалидности, выданной федеральным государственным учреждением медико-социальной экспертизы  *Указать дополнительные условия,* *учитывающие состояние здоровья, особенности психофизического развития*  увеличение продолжительности написания итогового сочинения (изложения) на 1,5 часа  иное (указать при необходимости):  *(иные дополнительные условия/материально-техническое оснащение,* *учитывающие состояние здоровья, особенности психофизического развития, сдача итогового сочинения (изложения) в устной форме по медицинским показаниям и др.)*  C Памяткой о порядке проведения итогового сочинения (изложения) ознакомлен (-а).  Подпись заявителя \_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Ф.И.О.)  Подпись родителя (законного представителя)\_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Ф.И.О.)  «\_\_\_\_» \_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_ г.   |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Контактный телефон |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Регистрационный номер |  |  |  |  |  |  |  |  |  |  |  | |