Директору КПНЗ “МАНУМ”ДОР”

 Тягло Н.В.

 учня (учениці) \_\_\_\_\_\_\_\_ класу

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(повна назва навчального закладу)

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Заява

 Прошу зарахувати мене до числа слухачів КПНЗ “Мала академія наук учнівської молоді” Дніпропетровської обласної ради”,
відділення \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, секції\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 (Прізвище та ініціали) (Підпис)

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