|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **заявление**  **на участие в государственной итоговой аттестации по образовательным программам среднего общего образования для выпускников текущего года** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  | | Регистрационный номер | | | | | | | | | | | | | | | | | | | | | | Руководителю  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *(наименование образовательной организации)*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *(ФИО руководителя)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ЗАЯВЛЕНИЕ** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Я,** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | *фамилия* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | *имя* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | | *отчество (при наличии)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Дата рождения:** | | | | | | |  | |  | | . | | | |  | | |  | . | | |  | | |  | | |  | |  | |  | | | |
|  | | | | | | |  | |  | |  | | | |  | | |  |  | | |  | | |  | | |  | |  | |  | | | |
| **Пол** | |  | мужской | | | |  |  | |  | | | женский | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
| **Наименование документа, удостоверяющего личность: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | |  |  |  | |  |  | | | | | | |  | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Серия** | | |  |  | |  |  | |  | | | **Номер** | | | | | | |  | |  | |  | | |  | | |  | |  | | | |  | | | |  | |  |  |  |
|  | | |  |  |  | |  |  | | | | | | |  | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **СНИЛС** | | |  |  | |  |  | |  | | |  | |  | |  | | |  | | |  | | |  | | |  | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |  | | |  | | | | | | |  | | |  | | | | | |  | | |  | | | | | | | | | |
| **Форма прохождения ГИА** | | | | | | | | | | | | | | |  | | **ЕГЭ** | | | | | | |  | | | **ГВЭ** | | | | | |  | | | | | **ЕГЭ и ГВЭ** | | | | | | | | |
| Прошу зарегистрировать меня для участия в государственной итоговой аттестации по следующим учебным предметам: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Наименование учебного предмета** | | | ***в форме ЕГЭ*** | | **Наименование учебного предмета** | | | | | | | | ***в формеГВЭ*** | | | досрочный период | основной период | досрочный период | основной период | | Русский язык | | |  |  | Русский язык: | | | | | | | | | | |  | | | | | | | | | | | Математика (базовый уровень) | | |  |  |  | | |  | *Сочинение* | | | |  |  | |  | | | | | | | | Математика (профильный уровень) | | |  |  |  | | |  | *Диктант* | | | |  |  | |  | |  | | | | | | | | Физика | | |  |  |  | | |  | *Устная форма* | | | |  |  | |  | | | | | | | | Химия | | |  |  |  | | | | | | | | | | | Информатика и ИКТ | | |  |  | Математика: | | | | | | | | | | | Биология | | |  |  | *Письменная форма* | | | | | | | |  |  | | История | | |  |  | *Устная форма* | | | | | | | |  |  | | География | | |  |  |  | | | | | | | |  |  | | Обществознание | | |  |  |  | | | | | | | |  |  | | Литература | | |  |  |  | | | | | | | |  |  | | Английский язык (письменная часть) | | |  |  |  | | | | | | | |  |  | | Английский язык (устная часть) | | |  |  |  | | | | | | | | | | | Немецкий язык (письменная часть) | | |  |  | | Немецкий язык (устная часть) | | |  |  | | Французский язык (письменная часть) | | |  |  | | Французский язык (устная часть) | | |  |  | | Испанский язык (письменная часть) | | |  |  | | Испанский язык (устная часть) | | |  |  | | Китайский язык (письменная часть) | | |  |  | | Китайский язык (устная часть) | | |  |  | |  | |  | | |  | |  |  | | | | |  | | | | |  |  |  |  | | Прошу организовать проведение экзаменов в условиях, учитывающих состояние моего здоровья, особенности психофизического развития, подтверждаемые:  - оригиналом или надлежащим образом заверенной копией рекомендаций ПМПК;  - оригиналом или надлежащим образом заверенной копией справки, подтверждающей факт установления инвалидности, выданной ФГУ МСЭ.  Необходимые условия проведения ГИА:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | **С порядком проведения ГИА, в том числе со сроками, местами проведения ГИА, с основаниями для удаления из ППЭ, с процедурой досрочного завершения экзамена по объективным причинам, правилами заполнения бланков, о ведении в ППЭ и аудиториях видеозаписи, с порядком подачи и рассмотрения апелляций о нарушении Порядка и о несогласии с выставленными баллами, со временем и местом ознакомления с результатами**  **ГИА, ознакомлен /ознакомлена.** | | | | | | | | | | |  |  | | | | |  | | | | | | | | | | |  | *(подпись участника ГИА)* | | | | | |  | | | | | | | | | | | | | | | | | Подпись заявителя \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (ФИО) | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | «\_\_\_\_\_» \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_\_ г. | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | Контактный телефон | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  | ( |  |  |  | ) |  |  |  | - |  |  | - |  |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |