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|  | | | | | | | | | | | | Директору МАОУ «Средняя школа № 3 имени А.С. Пушкина»  Е.В. Паламарчук | | | | | | | | | | | | | | | |
| ЗАЯВЛЕНИЕ  НА ПОВТОРНУЮ ПРОВЕРКУ СОЧИНЕНИЯ (ИЗЛОЖЕНИЯ) | | | | | | | | | | | | | | | | | | | | | | | | | |
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*фамилия*

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*имя*

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| **Дата рождения**: |  |  | . |  |  | . |  |  |  |  |

*отчество*

**Наименование документа, удостоверяющего личность** \_\_\_\_\_\_ПАСПОРТ\_\_\_\_\_\_

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| **Серия** |  |  |  |  |  | **Номер** |  |  |  |  |  |  |  |  |  |  |

Прошу осуществить повторную проверку сданного мною \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (указать дату)

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| сочинения |  | изложения |  |  |

Подпись заявителя \_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Ф.И.О.)

«\_\_\_\_» \_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_ г.

Контактный телефон

С заявлением сына (дочери) ознакомлен(а) / /