**REQUERIMENTO**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **NOME** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **CÓD. CURSO** | | | | |  | **C** | **U** | **R** | **S** | **O** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | **Nº MATRÍCULA** | | | | | | | |
|  |  |  |  |  | **-** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **ENDEREÇO** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **TELEFONE CELULAR** | | | | | | | | | |  |  |  |  |  |  | **TELEFONE RESIDENCIAL** | | | | | | | | |  |  |  |  |  |  |  | **TELEFONE COMERCIAL** | | | | | | | | |
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| **E-MAIL** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **OBJETIVO DO REQUERIMENTO** | | | | |
|  |  |  |  |  |
|  |  | APOSTILAMENTO DE DIPLOMA |  | MUDANÇA DE NOME |
|  |  | CERTIDÃO DE CONCLUSÃO DE CURSO |  | NOME SOCIAL |
|  |  | COLAÇÃO DE GRAU FORA DE PRAZO |  | RECURSO À CEG |
|  |  | DECLARAÇÃO DE INTEGRALIZAÇÃO |  | REVALIDAÇÃO DE DIPLOMA |
|  |  | HISTÓRICO ESCOLAR COM ANÁLISE |  | TRANSFERÊNCIA EX-OFFÍCIO – OUTRA IES P/ UFAM |
|  |  | HISTÓRICO ESCOLAR - 2ª. VIA (ALUNO FORMADO) |  | OUTROS |
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| **DESTINO DO DOCUMENTO** | | | | |
| **( ) SECRETARIA** | **( ) DPA** | **( ) CM/CRC** | **( ) CM ( ) CRC** | **( ) ARQUIVO** |
| **( ) CEG** | **( ) DRA** | **( ) DLN** | **( ) DAE ( ) CRD** |  |

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| **OBSERVAÇÕES** |  | **PROTOCOLO** |
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| **Manaus, \_\_\_\_\_\_ de \_\_\_\_\_\_\_\_\_\_\_\_ de 20\_\_\_.** |  |
|  | **Assinatura do Requerente** |
| **Visto do Orientador da COA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |

**VIA DO REQUERENTE**

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| **REQUERENTE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | **CURSO:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **DESTINO DO DOCUMENTO** | | | | | | **PROTOCOLO** |
| **( ) SEC.** | **( ) DPA** | **( ) CM/CRC** | **( ) CM** | **( ) CRC ( ) ARQUIVO** | |  |
| **( ) CEG** | **( ) DRA** | **( ) DLN** | **( ) DAE** | **( ) CRD** | |
| **DOCUMENTO SOLICITADO:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **VISTO DO(A) ORIENTADOR(A) DA COA:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | |

**CASO O REQUERENTE NÃO COMPAREÇA PARA RETIRÁR O DOCUMENTO SOLICITADO EM ATÉ 60 (SESSENTA) DIAS, ESTE SERÁ RECICLADO.**