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| http://www.unilab.edu.br/wp-content/uploads/2014/02/Logo-Unilab-vertical-para-fundo-claro.jpg | **UNIVERSIDADE DA INTEGRAÇÃO INTERNACIONAL DA LUSOFONIA AFRO-BRASILEIRA**  **PRÓ-REITORIA DE EXTENSÃO, ARTE E CULTURA**  **Coordenação de Extensão e Assuntos Comunitários**  **Coordenação de Arte e Cultura** |  |

**FORMULÁRIO DE CADASTRAMENTO DE MONITOR VOLUNTÁRIO**

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| **Edital PROEX 09/2016 – Monitoria III Semana Universitária da UNILAB** | |
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| **DADOS DO MONITOR VOLUNTÁRIO** | | | | | | | | |
| Nome do Monitor Voluntário: | | | | | | | | |
| Data de nascimento: | CPF: | | | RG: | | | | Órgão e Data de Expedição: |
| Sexo: | Curso: | | | Turno: | | | | Matrícula: |
| Endereço: | | | | | | Nº: | Bairro: | |
| Cidade: | | | Estado: | | | | CEP: | |
| Telefone residencial: | | Telefone celular: | | | E-mail: | | | |
| Nacionalidade: | | | | | | | | |

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| **CARTA DE APRESENTAÇÃO** |
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| **TERMO DE COMPROMISSO** |
| [ ] Declaro expressamente conhecer e concordar, para todos os efeitos e consequências de direito, com as condições gerais para a monitoria voluntária para o Monitoria III Semana Universitária da UNILAB |

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| **OBSERVAÇÃO** |
| Anexar comprovante de matrícula do período atual |

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**Local (CIDADE-UF) e Data (DD/MM/AAAA)**