###### MONITORIA VOLUNTÁRIA

### *Dados do requerente*

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| --- | --- |
| Nome: | Nº USP: |
| e-mail **USP** (legível): |
| e-mail **alternativo** (legível): |
| Telefone: | Celular: |
| Curso/habilitação: |
| Período: ( ) diurno ( ) matutino ( ) noturno |

### *Disciplina*

|  |  |
| --- | --- |
| Código: | Nome: |
| Docente: |

### *Carta de motivação:*

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*Nestes termos, peço deferimento.*

*São Paulo, \_\_\_\_ de\_\_\_\_\_\_\_\_\_\_\_ de\_\_\_\_\_\_\_*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

Assinatura do aluno