Ilma. Sr.

**Prof. Dr. EDER REZENDE MORAES**

MD. Presidente da Comissão de Graduação da Faculdade de Filosofia, Ciências e Letras de Ribeirão Preto da

Universidade de São Paulo

**PREENCHER EM LETRA DE FORMA**

NOME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, número USP\_\_\_\_\_\_\_, aluno(a) regularmente matriculado(a) no\_\_\_semestre do curso de \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ desta Faculdade, venho requerer:

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Nestes termos,

pede deferimento.

Ribeirão Preto,\_\_ de \_\_\_\_\_\_\_\_\_ de 2020.

Assinatura e telefone para contato