**SOLICITAÇÃO DE AFASTAMENTO NO PAÍS**

Período Letivo: \_\_\_\_\_\_\_\_\_\_\_

Professor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Período: \_\_\_/\_\_\_\_/\_\_\_\_ a \_\_\_/\_\_\_\_/\_\_\_\_ Local: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Objetivo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Obs: Quando for o caso, anexar carta, convite, carta de aceitação e/ou etc.

1. Substituição para atividades administrativas

Cargo/Função: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Substituto: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Recuperação para Atividades Didáticas (Graduação e Pós-Graduação)

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| **Disciplina 1:** | | | | | | | | | | |
| Aulas | Dia |  |  |  |  |  |  |  |  |  |
|  | Hora |  |  |  |  |  |  |  |  |  |
| Recup | Dia |  |  |  |  |  |  |  |  |  |
|  | Hora |  |  |  |  |  |  |  |  |  |
| Professor: Assinatura: | | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Disciplina 2:** | | | | | | | | | | |
| Aulas | Dia |  |  |  |  |  |  |  |  |  |
|  | Hora |  |  |  |  |  |  |  |  |  |
| Recup | Dia |  |  |  |  |  |  |  |  |  |
|  | Hora |  |  |  |  |  |  |  |  |  |
| Professor: Assinatura: | | | | | | | | | | |

Florianópolis: \_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_\_

De acordo

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| Professor Solicitante | Chefe do Departamento |