**Formulário de Solicitação de Extensão de Prazo**

Eu, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, discente do curso de Pós-graduação *Lato Sensu* em Cafeicultura Sustentável do IF Sudeste MG – *Campus* Manhuaçu, número de matrícula \_\_\_\_\_\_\_\_\_\_\_, solicito prorrogação de \_\_\_\_\_ meses (até seis meses) do prazo regular para integralização do curso (18 meses), em virtude de \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

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Assinatura do(a) discente

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| **Orientador(a):**( ) Deferido ( ) Indeferido Justificativa: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Assinatura do(a) orientador(a) |

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| **Colegiado:** ( ) Deferido ( ) Indeferido Data: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ |

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| **Registro Acadêmico:** Recebido em: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Registro Acadêmico |

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| ***Proposta de novo cronograma de atividades*****Novo período:** \_\_/\_\_\_\_ a \_\_/\_\_\_\_

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| **Atividade** | **ANO** |
| **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** |
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**Observações:**

- O pedido de prorrogação deve ser protocolado no prazo mínimo de 30 dias antes do término do tempo regulamentar.

- Após deferida a solicitação, o estudante deverá procurar o Registro Acadêmico, para preenchimento do formulário de matrícula institucional.