**FORMULÁRIO DE RECURSO**

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| **Orientações ao aluno(a):**1. Preencha este formulário.
2. Entregue este formulário juntamente com o formulário de requerimento para o REGISTRO ACADÊMICO.
3. O recurso será analisado pelo setor responsável e, se aceito, a solicitação será deferida.
 |

Eu,       , aluno(a) regularmente matriculado(a) no       período do curso       , ano de ingresso       , matrícula n°      , do IF Sudeste MG Campus Avançado Bom Sucesso, venho requer a recurso contra o resultado da solicitação realizada no requerimento de número (nº protocolo)       :

A decisão objeto de contestação é (explicitar a decisão que está contestando):

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Os argumentos com os quais contesto a referida decisão são:

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**Para fundamentar essa contestação, encaminho em anexo os seguintes documentos:**

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Bom Sucesso, \_\_\_\_\_\_ de \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ de \_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Assinatura do(a) aluno(a)

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| **Reservado ao Setor Responsável** |
| DESPACHO DO SETOR RESPONSÁVEL (*UTILIZAR O VERSO PARA PARECER, SE NECESSÁRIO*):  |
| **\_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_Data** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ASSINATURA** |
| **D****ECISÃO DO SETOR RESPONSÁVEL:** | **[ ]**  | **DEFERIDO** | **[ ]**  | **INDEFERIDO** |

**Parecer do Colegiado:**

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