**EDITAL Nº 002/2018**

**PROGRAMA DE AUXÍLIO PERMANÊNCIA-PAP**

**FORMULÁRIO de RECURSO**

**Eu, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, portador do RG nº \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ e CPF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ estudante do curso \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ do Campus de São José dos Campos do Instituto Federal de São Paulo, demandante de auxílios estudantil do Programa de Auxílio Permanência PAP, regulamentado pelo Edital nº SJC. 002/2018, sobre o atendimento PAP, para o 1º semestre 2018, venho à Coordenadoria do Sociopedagógico interpor recurso contra o resultado preliminar do Programa (PAP) publicado no site institucional em 16/03/2018.**

**Assim, expresso abaixo a JUSTIFICATIVA por escrito, para revisão do resultado e anexo os comprovantes pertinentes a comprovação das informações prestadas.**

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**São José dos Campos, \_\_\_\_\_ de \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2018.**

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**Assinatura do Aluno Responsável pelo menor de 18 anos**