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|  | Приложение №4  к Регламенту работы Центра тестирования Кемеровского муниципального округа по принятию нормативов ВФСК «ГТО» |

**ЗАЯВКА**

**на очередное прохождение тестирования в рамках Всероссийского физкультурно-спортивного комплекса «Готов к труду и обороне» (ГТО) несовершеннолетним лицом**

*(заполняется печатными буквами)*

1. **Сведения о заявителе**

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| Фамилия |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Имя |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Отчество |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Данные паспорта заявителя:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Серия | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Номер | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Дата выдачи | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Кем выдан | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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**Место жительства заявителя:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Регион | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Район | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Насел. пункт | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Адрес | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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**Иные сведения о заявителе:**

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| --- | --- |
| Контактный телефон |  |
| Адрес электронной почты |  |

Прошу рассмотреть вопрос об очередном прохождении тестирования в рамках ВФСК «ГТО» нижеуказанным лицом:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Фамилия |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Имя |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Отчество |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| УИН |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

которому являюсь (указать степень родства) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ по следующим испытаниям

(тестам):

|  |  |
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| Перечень выбранных испытаний | 1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  5.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  6.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  7.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  8.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  9.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  10.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

«\_\_» \_\_\_\_\_\_\_\_\_\_\_202\_\_г. Подпись законного представителя \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_