**FORMULÁRIO DE INTERPOSIÇÃO DE RECURSO REFERENTE A CHAMADA 34/2019 DO PROCESSO SELETIVO SIMPLIFICADO DE CADASTRO DE PROFISSIONAIS COM DEFICIÊNCIA PARA FORMAÇÃO DE BANCO DE CURRÍCULOS PARA ATUAÇÃO NA FIOTEC.**

NOME COMPLETO:

CPF:

IDENTIDADE:

E-MAIL:

TELEFONE PARA CONTATO:

CARGO CONCORRIDO:

1. **Com qual resultado do Processo Seletivo você não concordou?**

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1. **Apresente os argumentos da contestação.**

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**Data: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_**

**Assinatura:**