Solicitação de Inclusão de Docente como Colaborador

*Projeto de pesquisa*

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| Número do projeto: |  |

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| Título: |

*Coordenador*

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| Chapa: |  | Nome: |  |

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| Telefone fixo: |  | Celular: |  | e-mail: |  |

*Docente*

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| Chapa: |  | Nome: |  |

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| Carga horária solicitada: | 0 | horas semanais |

*Anexar*

- Espelho de Projeto

- Plano de trabalho de atividades a serem desenvolvidas e **justificativa**.

Londrina, 1 de novembro de 2023.

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| Coordenador do Projeto |  | Docente |

*Pareceres*

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| **Carga horária aprovada**: |  | **Horas semanais** |

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| *Comissão de Pesquisa do Departamento* | | | | | | | | | | | | | |  | *Conselho de Departamento* | | | | | | | | | | | |  | | |
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|  |  | Recomendado | | | | |  | |  | | Não recomendado | |  |  |  | Recomendado | | | | |  | | |  | Não recomendado | | | |
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|  | *Comissão de Pesquisa do Centro* | | | | | | | | | | | |  |  | *Conselho de Centro* | | | | | | | | | | | |  | | |
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|  |  | Recomendado | | | | |  | |  | | Não recomendado | |  |  |  | Recomendado | | | | |  | | |  | Não recomendado | | | |
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|  | Cargo: | | |  | | | | | | | | |  |  | Cargo: | | |  | | | | | | | | |  | | |