**PROCESSO SELETIVO PPGA 2023-2024**

**ANEXO 10 – FORMULÁRIO DE INTERPOSIÇÃO DE RECURSOS E PEDIDOS DE RECONSIDERAÇÃO[[1]](#footnote-0)**

Eu, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, CPF: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, número da inscrição: \_\_\_\_\_\_\_\_\_\_\_\_\_, Linha: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, abaixo assinado(a), venho através do presente, em grau de RECURSO, solicitar a revisão da nota/resultado da fase \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, e deferimento do resultado inicial, pelas razões abaixo expostas:

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João Pessoa/PB, \_\_\_\_\_\_\_/\_\_\_\_\_\_\_/2023.

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

Assinatura do requerente

1. *Os pedidos de reconsideração serão julgados pela Comissão de Seleção, que terá o prazo de 2 (dois) dias úteis, contados a partir da data do término do prazo de solicitação do pedido para análise e divulgação de seu parecer.* [↑](#footnote-ref-0)