Руководителю ШСМ

МОУ «СОШ №14» г.Воркуты

Тигаевой И.О.

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ФИО (полностью)

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**ЗАЯВЛЕНИЕ**

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***Согласие на использование персональных данных***

***в отчётных документах школьной службы медиации***

***МОУ «СОШ №14» г.Воркуты***

На использование моих персональных данных в документах школьной службы медиации

в следующем объёме: фамилия, имя, отчество, краткое описание конфликтной ситуации,

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согласен (согласна) / не согласен (не согласна).

«\_\_\_\_\_\_»\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_\_г.

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Подпись Расшифровка