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| **1. Nazwa szkoły podstawowej** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | |  | | |  | | |  | | |  | | |  | | | |  | | |  | | |  | | |  | | |  | | |  | | | | | | |  | | | |  | | | | |  | |  | |  | |  | |  | |  | | | | | | |
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| **2. NIP[[1]](#footnote-1)** | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | **3. REGON** | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
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| **4. Adres szkoły podstawowej** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Numer EP zatwierdzonej szkoły podstawowej

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| Oświadczam, że w ……………………………………………………………………………………………..….  (nazwa szkoły podstawowej)  w okresie od ……………….………… do …………………….……… prowadzony był strajk nauczycieli.  (dd/mm/rrrr) (dd/mm/rrrr) |

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| **Miejscowość:**  **Data \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_\_\_\_\_- \_\_\_\_\_\_\_\_\_**  **(dzień) (miesiąc) (rok)**  **Data - - \_**  **(dzień)(miesiąc)(rok)** |  | **Pieczęć Szkoły Podstawowej** |  | **Podpis dyrektora szkoły lub osoby uprawnionej**  **do reprezentowania szkoły**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Podpis i pieczęć imienna** |

1. [↑](#footnote-ref-1)