**SOL·LICITUD DE PARTICIPACIÓ A LES “ACTIVITATS DE MENTORATGE ACADÈMIC”**

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| **DADES PERSONALS** | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Nom | | | |  | Primer cognom | | | | | |  |  |  | Segon cognom | | | | |  |  |  |
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| Adreça electrònica | | | | | | | | | | | | | | | | | | | | | |
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| Facultat/Escola | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **EXPOSO** | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | Que el curs acadèmic estic cursant el Grau en | | | | | | | | | | |  | | | | | | |  |  |  |
|  | Que la meva disponibilitat horària durant aquest curs és la següent: | | | | | | | | | | | | | | | | | |  |  |  |
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|  | Dilluns | |  | Dimarts | | |  |  | Dimecres |  |  |  | Dijous | | | |  |  | Divendres | |  |
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| **SOL·LICITO** | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | Participar a les activitats de mentoratge acadèmic del curs per a les següents | | | | | | | | | | | | | | | | | | | | |
|  | assignatures: | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | Codi |  | |  |  |  | Nom assignatura | | | |  |  |  |  |  |  |  |  | Qualificació | |  |
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|  | **La sol·licitud s’ha d’enviar emplenada i signada adjunta a una** [**sol·licitud genèrica del registre electrònic**](https://eadmin.uab.cat/eregistre/formularis/generic) | | | | | | | | | | | | | | | | | | | | |
|  | **Data i signatura** | | | | | | | | | | | | | | | | | | | | |
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