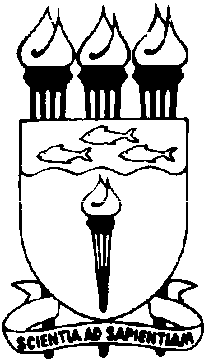
**FORMULÁRIO DE RECURSO – EDITAL 18/2017 – PROPEP/UFAL**

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| Nome completo: | | | |  | | | | |
| CPF: |  | | | | Data da solicitação: | |  | |
| E-mail: | |  | | | | Telefone: | |  |
| Item(ns): | | |  | | | | | |

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| Item: |
| Item: |
| Item: |