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|  | Universidade Estadual de Londrina | **Requerimento de Isenção** |
| **Pró-reitora de Pesquisa e Pós-Graduação**  **Diretoria de Pós-Graduação**  Reconhecida pelo Decreto Federal nº69324 de 7/10/1971 | |

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| **e-mail** |  | **Telefone:** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Curso/Programa a se inscrever |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Requer: |  | Isenção Lei 19.196/2017 – Justiça Eleitoral |
|  |  | Isenção Lei 19.293 – 13/12/2017 - Doador de Sangue |

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