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| **IDENTIFICAÇÃO DO ALUNO** | ANO LETIVO | **2023** | **2024** |

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| **Cartão Cidadão/BI** |  |  |  |  |  |  |  |  |  | **NIF** |  |

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| **Nome** |  |

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| **Morada** (rua/lugar/ Nº./andar/apart.**)** |  |

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| **Freguesia** |  | **E-mail** |  |

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| **Código Postal** | 4 | 5 | 5 | 0 | - |  |  |  |  |

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| **Incapacidade Motora**: |  **Sim** |  |  **Não** |  |  **Data de Nascimento** |   | **Telefone** |  |

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| **Pai** |  |

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| **Mãe** |  |

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| **Ano de Ensino que vai frequentar** |  | **º. Ano** | **Curso** |  |

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| **Agrupamento de Escolas Castelo de Paiva** |  | **Escola EB 2/3 Couto Mineiro** |  |

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| **Outro**  |  | **Qual?** |  |

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| **IDENTIFICAÇÃO DO TRANSPORTE A UTILIZAR** |

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| **Local de Entrada** - **Paragem do Autocarro** |  |  |  |  |

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| **Empresa Transportadora** |  | Circuito |  |  |  |  |

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| **Nº. do Passe do ano anterior** |  | **Empresa** |  |

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| ATIVAÇÃO |  |  | PASSE NOVO |  |  |  |  |

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| **JUNTA**: - **1 FOTOGRAFIA (PRIMEIRO PASSE)** |

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| **ENCARREGADO DE EDUCAÇÃO** | **Nº. Contribuinte** |  |  |  |  |  |  |  |  |  |

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| **Nome** |  |

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| **Morada** (rua/lugar/ Nº./andar/apart.) |  |

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| **Freguesia** |  | **E-mail** |  |

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| **Código Postal** |  |  |  |  | - |  |  |  |  |

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| **Telefone** |  |  **Parentesco em relação ao aluno** |  |

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| **DATA E ASSINATURA DO ENCARREGADO DE EDUCAÇÃO** |

Declaro, sob compromisso de honra, que os elementos indicados correspondem à verdade, e assumo toda a responsabilidade pelo cumprimento dos deveres inerentes ao uso do transporte escolar pelo aluno acima identificado.

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| **Data** |   | **Assinatura** |  |

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| **Cartão Cidadão/BI** |  |  |  |  |  |  |  |  |  | **Data** |  **/ /** | **Arq.** |  |

ÁREA RESERVADA À CÂMARA MUNICIPAL

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| **INFORMAÇÕES DOS SERVIÇOS** |

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| **DESPACHO** |

No uso da competência em mim ............delegada, e de acordo com as informações supra, ............................. o pedido.

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O ................................................................, ....................................................................................................................................

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| **ANOTAÇÕES DOS SERVIÇOS** |

Satisfeito o pedido em ........../............/................... O funcionário, ......................................................

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| **OBSERVAÇÕES/AVERBAMENTOS** |