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| **SOLICITAÇÃO DE REAGENDAMENTO DE FÉRIAS** |

Nome: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ matrícula nº\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Secretaria: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ tel./cel: ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nº Aviso de Férias:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Período Aquisitivo:\_\_\_\_\_/\_\_\_\_\_\_

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Período anterior: \_\_\_/\_\_\_/\_\_\_ a \_\_\_/\_\_\_/\_\_\_\_ Novo Período \_\_\_\_/\_\_\_/\_\_\_a \_\_\_/\_\_\_/\_\_\_

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| JUSTIFICATIVA: |
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Caraguatatuba, \_\_\_ de \_\_\_\_\_\_\_\_\_\_ de 202\_\_.

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|  Assinatura do Servidor |

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|  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  Autorização do (a) Chefe Imediato(a) |

Ciência do Servidor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_