

**REGISTRO**

**SOLICITUD DE CERTIFICACIÓN ACADÉMICA PERSONAL**

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| A) Datos Personales | | | | | | | | | | | | | |
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| Apellidos y nombre | |  | | | | | | DNI, NIE o Pasaporte | | |  | |  |
|  |  |  | |  | C.P. | | | Localidad.: | | | Provincia: | |  |
| Domicilio |  | | | |  |  |  | |  | |  |  |  |
|  |  | |  |  |  | | | Teléfono móvil: | | | Teléfono Fijo: | | |
| Correo-e: |  | | | |  | | |  | | |  |  |  |
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| B) Datos Académicos | | | | | | | | | | | | | | | | |
|  | Prueba de Acceso a la Universidad ( Selectividad/EBAU) | | | | | | | | | | | | | | | |
|  |  | |  |  |  |  | | | | |  | |  | |  | |
| Convocatoria ordinaria (junio) | | | |  | Convocatoria extraordinaria (Septiembre) | | | | | | | | Año: |  | |  |
|  | | | | | | | | | | | | | | | | |
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|  | | Prueba de Acceso mayores de 25 años | | | | |  | Prueba de Acceso mayores de 45 años | | | | | | |  | |
|  | | Acceso mayores de 40 años | | | | |  | Otro (Indique cual) | |  | | | | |  | |
|  | |  |  |  | Año: | | |  |  | | |  | | |  | |

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| C) TASAS | | | | | | | | | |
| Bonificación | 50% Familia numerosa general |  | 100% Familia numerosa especial | |  | Ordinaria | |  |  |
| Documentación a entregar: | * Recibo de abono de Precios Públicos * Carnet de Familia Numerosa (en su caso) | | |  | | |  | | |

Murcia, a ……………. de……………de 20

(Firma del interesado/a)

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**RESGUARDO DE SOLICITUD DE CERTIFICACIÓN ACADÉMICA PERSONAL**

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|  |  |  | |  |  |  |  |  |  |
| Apellidos y nombre | |  | | | | DNI, NIE o Pasaporte | |  |  |
| FECHA: |  |  | |  |  |  | |  |  |
|  |  | |  |  |  |  |  |  |  |

**AUTORIZACIÓN**

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| --- |
| Autorizo a: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Con DNI \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  A retirar la Certificación Académica Personal  Documentación a aportar:   * Fotocopia DNI del interesado/a * DNI original de la persona autorizada |