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Ime i prezime podnositelja zahtjeva

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adresa stanovanja

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telefon/mobitel

**OŠ. DR. IVAN MERZ**

**RAČKOGA 4**

**10 000 ZAGREB**

**PREDMET: ZAHTJEV ZA ISPIS S IZBORNOG PREDMETA**

Molim Učiteljsko Vijeće da mom djetetu \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

(ime i prezime)

učeniku\_\_\_\_\_\_\_\_\_ razreda, rođenom \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ u \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_odobri ispis s

(datum) (mjesto rođenja)

izbornog predmeta \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

iz razloga\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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(navesti razlog ispisa) ­­­­­­­­­­­­­­­­­­

U Zagrebu\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ vlastoručni potpis (oba roditelja)