KWESTIONARIUSZ UCZNIA kl. I na r. szk. 2017/2018

I LICEUM OGÓLNOKSZTAŁCĄCEGO

im. KAZIMIERZA BRODZIŃSKIEGO

w TARNOWIE

PROSZĘ WYPEŁNIĆ DRUKOWANYMI LITERAMI. (jeśli nie dotyczy – pozostawić pole puste.

\*-w okienkach oznaczonych tym znakiem wybrać odpowiednią odpowiedź i zaznaczyć „x”)

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**N a z w i s k o I m i ę**

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Nr telefonu e-mail ucznia **A d r e s zamieszkania:** Miejscowość

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W o j e w ó d z t w o P o w i a t G m i n a

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W o j e w ó d z t w o P o w i a t G m i n a

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**I m i ę o j c a /P r a w n e g o o p i e k u n a** **N a z w i s k o o j c a/P r a w n e g o o p i e k u n a** Stopień pokrewieństwa

ADRES OJCA/PRAWNEGO OPIEKUNA:

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N r P E S E L Nr telefonu OJCA e-mail OJCA/Prawnego opiekuna

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A d r e s zamieszkania: Miejscowość Ulica Nr domu/mieszkanie Kod pocztowy Poczta

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W o j e w ó d z t w o P o w i a t G m i n a

Ja, .................................................., zamieszkały w .................................................................................., niniejszym wyrażam zgodę na

(imię i nazwisko OJCA/prawnego opiekuna) (adres OJCA/prawnego opiekuna)

przetwarzanie przez I Liceum Ogólnokształcące im. Kazimierza Brodzińskiego w Tarnowie mojego imienia, nazwiska, adresu e-mail i numeru PESEL, które zostały podane powyżej na potrzeby umożliwienia mi logowania do systemu UONET w celu udostępnienia mi danych dotyczących m.in.: ocen, frekwencji i uwag dotyczących mojego dziecka, będącego uczniem wspomnianej szkoły.

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(podpis OJCA/prawnego opiekuna)

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**I m i ę m a t k i /P r a w n e g o o p i e k u n a** **N a z w i s k o m a t k i/P r a w n e g o o p i e k u n a**  Stopień pokrewieństwa

ADRES MATKI/PRAWNEGO OPIEKUNA:

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N r P E S E L Nr telefonu MATKI e-mail MATKI/Prawnego opiekuna

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A d r e s zamieszkania:Miejscowość Ulica Nr domu/Mieszkanie Kod pocztowy Poczta

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W o j e w ó d z t w o P o w i a t G m i n a

Ja, .................................................., zamieszkała w .................................................................................., niniejszym wyrażam zgodę na

(imię i nazwisko MATKI/prawnego opiekuna) (adres MATKI/prawnego opiekuna)

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(podpis MATKI/prawnego opiekuna)

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N a z w a G i m n a z j u m N r G i m n a z j u m

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A d r e s: Miejscowość Ulica Nr Kod pocztowy Poczta

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W o j e w ó d z t w o P o w i a t G m i n a

Uczestnictwo w olimpiadach i konkursach przedmiotowych:

osiągnięty wynik przedmiot(-y) z zakresu, którego osiągnięto wynik

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| --- | --- | --- | --- |
| 1. *Laureat* |  | *\** |  |
| 1. *Finalista* |  | *\** |  |
| 1. *Etap rejonowy* |  | *\** |  |
| 1. *Etap szkolny* |  | *\** |  |
| *INNE:....................................................................................................* |  | *\** |  |

Posiadam:

|  |  |
| --- | --- |
| 1. *Orzeczenie poradni psychologiczno-pedagogicznej \** |  |
| 1. *Opinię poradni psychologiczno-pedagogicznej \** |  |

Na podstawie Regulaminu Rekrutacji do klas pierwszych na rok szkolny 2017/2018 uczniowie zakwalifikowani potwierdzając wolę uczęszczania do I LO w Tarnowie **obowiązkowo deklarują, jakiego drugiego języka obcego chcą się uczyć**. Z uwagi na fakt, że ilość grup danego języka obcego jest ograniczona uczniowie podają w kolejności ważności dla siebie co najmniej dwa języki obce spośród następujących:

|  |  |
| --- | --- |
| * j. francuski, * j. niemiecki, | * j. hiszpański, * j. włoski. |

O zakwalifikowaniu do danej grupy językowej decyduje SKR-K na podstawie ilości punktów zdobytych w postępowaniu rekrutacyjnym.

*Deklaruję chęć nauki następującego drugiego języka obcego:*

|  |  |  |
| --- | --- | --- |
|  | *Na poziomie:* |  |
|  | *Na poziomie:* |  |
|  | *Na poziomie:* |  |
|  | *Na poziomie:* |  |

*M i e s z k a m:*

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| *DOM RODZINNY* |  | *\** | *RODZINA PEŁNA* |  | *\** |
| *INTERNAT* |  | *\** | *RODZINA ZASTĘPCZA* |  | *\** |
| *STANCJA* |  | *\** | *PÓŁSIEROTA* |  | *\** |
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|  |  |  | *SAMOTNE WYCHOWYWANIE* |  | *\** |

**Ważne informacje o uczniu (przewlekłe choroby, inne ważne sprawy i problemy, itp. ):** …………………………………….......…..

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Wyrażam zgodę na zbieranie, przetwarzanie i wykorzystywanie przez I Liceum Ogólnokształcące im. Kazimierza Brodzińskiego w Tarnowie danych osobowych mojego dziecka oraz moich, jako rodzica (opiekuna prawnego), w tym umieszczonych w niniejszym kwestionariuszu, w zakresie działalności dydaktyczno – wychowawczo – opiekuńczej zgodnie z Ustawą o Ochronie Danych Osobowych (Dz. U. z 1997 r. nr 133, poz. 883 z późniejszymi zmianami) oraz z Rozporządzeniem Ministra Edukacji Narodowej z dnia 19 kwietnia 1999 r. w sprawie sposobu prowadzenia przez publiczne przedszkola, szkoły i placówki dokumentacji przebiegu nauczania, działalności wychowawczej i opiekuńczej oraz rodzajów tej dokumentacji (Dz. U. 41 poz. 414) i rozporządzeniem Ministra Edukacji Narodowej z dnia 27 sierpnia 2001 r. w sprawie warunków i trybu przyjmowania uczniów do publicznych przedszkoli i szkół oraz przechodzenia z jednych szkół do innych (Dz. U. nr 97, poz. 1054).

**Zobowiązuję się do niezwłocznego poinformowania pracownika Sekretariatu Uczniowskiego I LO o wszelkich zmianach w danych osobowych.**

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Podpis MATKI/Podpis opiekuna Podpis OJCA/Podpis opiekuna

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*Tarnów, dnia ........................ . 2017 r.* Podpis UCZNIA