**Anexa nr. 2 la Procedura privind organizarea și funcționarea Comisiei de coordonare a activității de repartizare a preșcolarilor/ elevilor la unitățile de învățământ în care pot desfășura activități educaționale, precum și în instituțiile în care vor beneficia de asistență psihopedagogică și consiliere\_ORDIN\_MINISTERUL EDUCAȚIEI\_ nr. 5679/2024;**

**TIPIZAT \_LIMBA ENGLEZĂ**

The undersigned, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, parent/legal representative/competent authority/ representative of an operative group for unaccompanied minors of the minor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, camped in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, I kindly ask you to approve the enrollment of the aforementioned minor, age\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, in a school starting with the date of\_\_\_\_\_\_\_\_\_\_\_\_\_, in order to participate at the following activities:

□ Student in the audience, for year\_\_\_\_\_\_\_\_\_\_\_\_ (group/class/level)

□ Extracurricular activities, without the status of ``student in the audience``

□ Counselling and psychological assistance

Other rights: □ Housing

□ Food

□ Transport

□ Schooling in a hospital

**Note: In case the student is over 18, they can enroll themselves by completing this letter of request.**

Contact details of the person who requested the enrollment:

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:

Date: