**WNIOSEK  
o przyjęcie do klasy ………………… Technikum Kreatywnego  
w roku szkolnym 2023/2024**

| **ZAWÓD** | **SPECJALNOŚĆ** | | | |
| --- | --- | --- | --- | --- |
| **Technik informatyk** | Tworzenie gier komputerowych |  | Grafika komputerowa |  |
| **Technik fotografii  i multimediów** | Fotografia kreatywna |  | Animacja i cyfrowe efekty specjalne |  |

| **DANE OSOBOWE KANDYDATA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PESEL** |  | |  | | | | |  | | |  | | | |  | | | |  | | | | |  | |  | |  | | |  | |  | | **Płeć** | **K** | **M** |
| **Imię** |  | | | | | | | | | | | | | | | | | | | | **Drugie imię** | | | | | | | |  | | | | | | | | |
| **Nazwisko** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Data urodzenia** |  |  | | | - | |  | | |  | | - | |  | | |  | | |  | |  | | | **Miejsce urodzenia** | | | | |  | | | | | | | |
| **ADRES ZAMIESZKANIA KANDYDATA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Ulica** | | | |  | | | | | | | | | | | | | | | | | | | | | | | **Nr domu/ mieszkania** | | | | | | |  | | | |
| **Kod pocztowy** | | | |  | |  | | | **-** | | | |  | | |  | |  | | | **Miejscowość** | | | | | | | |  | | | | | | | | |
| **Telefon** | | | |  | | | | | | | | | | | | | | | | | **email** | | | | | | | |  | | | | | | | | |
| **DANE OSOBOWE OJCA (OPIEKUNA PRAWNEGO)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Imię** | | | |  | | | | | | | | | | | | | | | | | | | **Nazwisko** | | | | | | | | |  | | | | | |
| **Telefon** | | | |  | | | | | | | | | | | | | | | | | | | **email** | | | | | | | | |  | | | | | |
| **DANE OSOBOWE MATKI (OPIEKUNA PRAWNEGO)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Imię** | | | |  | | | | | | | | | | | | | | | | | | | **Nazwisko** | | | | | | | | |  | | | | | |
| **Telefon** | | | |  | | | | | | | | | | | | | | | | | | | **email** | | | | | | | | |  | | | | | |
| **Szkoła do której kandydat uczęszcza/ł  (podaj nazwę Szkoły)** | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |

………………………..…………, dnia ………...........................................   
 (miejscowość)

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(czytelny podpis rodzica/opiekuna)

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(czytelny podpis rodzica/opiekuna)

**Dokumenty potrzebne do przyjęcia do szkoły:**

* oryginał świadectwa ukończenia szkoły
* zaświadczenie OKE o wyniku egzaminu
* opinia/orzeczenie poradni psychologiczno-pedagogicznej (jeśli posiada)
* zaświadczenie lekarskie
* karta zdrowia ucznia
* dwa zdjęcia ucznia