**I Z J A V A / Z A H T J E V**

JA RODITELJ/STARATELJ (ime i prezime) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ UČENIKA (ime i prezime) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ŽELIM DA MOJE DIJETE POHAĐA ONLINE NASTAVU OD:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DO:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZBOG SLJEDEĆIH RAZLOGA:

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KONTAKT RODITELJA:

TEL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-MAIL ADRESA:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADRESA:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IME I PREZIME RODITELJA/STRATELJA I POTPIS:

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Datum podnošenja zahtjeva:

PREGLEDAO I ODOBRIO:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_