**REGISTRO DE DISCENTES COM INACESSIBILIDADE ÀS AULAS VIA RED 2020/1**

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| --- | --- | --- | --- | --- | --- |
| **Professor(a):** | |  | | | |
| **Componente Curricular:** | | |  | | |
| **Curso:** |  | | | **Semestre:** |  |

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| --- | --- | --- |
| **Nº** | **NOME DO ALUNO** | **DIFICULDADES DETECTADAS NO ALUNO** |
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**Assinatura do Professor**

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**Assinatura do Coordenador de Curso**