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| **ΑΙΤΗΣΗ ΑΠΟΣΠΑΣΗΣ ΕΝΤΟΣ ΠΥΣΠΕ**

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| **Α.Μ.** |  |
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| **ΣΥΝΟΛΙΚΗ ΥΠΗΡΕΣΙΑ** |
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| **ΟΙΚΟΓΕΝΕΙΑΚΗ ΚΑΤΑΣΤΑΣΗ** |
| **ΑΓΑΜΟΣ / Η** |  |
| **ΕΓΓΑΜΟΣ / Η** |  |
| **ΔΙΑΖΕΥΓΜΕΝΟΣ / Η** |  |
| **ΣΕ ΔΙΑΣΤΑΣΗ** |  |
| **ΣΕ ΧΗΡΕΙΑ** |  |

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| **ΣΥΝΟΛΟ ΠΑΙΔΙΩΝ ΠΟΥ ΜΟΡΙΟΔΟΤΟΥΝΤΑΙ** |  |

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| **ΕΝΤΟΠΙΟΤΗΤΑ ΣΕ ΔΗΜΟ** | **ΝΑΙ** |  |  | **ΟΧΙ** |  |
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| **ΟΝΟΜΑΣΙΑ ΔΗΜΟΥ** |  |

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| **ΣΥΝΥΠΗΡΕΤΗΣΗ ΜΕ ΣΥΖΥΓΟ** | **ΝΑΙ** |  |  | **ΟΧΙ** |  |
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| **ΟΝΟΜΑΣΙΑ ΔΗΜΟΥ ΕΡΓΑΣΙΑΣ ΣΥΖΥΓΟΥ** |  |

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| **ΒΡΙΣΚΟΜΑΙ ΣΕ ΑΔΕΙΑ** | **ΝΑΙ** |  |  | **ΟΧΙ** |  |

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| **ΕΙΔΟΣ** | **ΕΩΣ (ΗΜΕΡΟΜΗΝΙΑ)** |
| **ΑΝΑΤΡΟΦΗΣ** |  |
| **ΚΥΗΣΗΣ** |  |
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**Θέμα : Αίτηση απόσπασης σε λειτουργικά κενή θέση****Αλεξανδρούπολη, …….. / …….. / 20…..** | ΠΡΟΣ**ΤΟ ΠΥΣΠΕ ΕΒΡΟΥ**(ΜΕΣΩ ΤΗΣ ΔΙΕΥΘΥΝΣΗΣΠ.Ε. ΕΒΡΟΥ)Σας παρακαλώ να με αποσπάσετε σε σχολική μονάδα της **Διεύθυνσης Π.Ε. Έβρου** σύμφωνα με την παρακάτω σειρά προτίμησης για το σχολικό έτος **2017– 2018**

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**Ο /η αιτ………..****(Υπογραφή)** |