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| **УТВЕРЖДАЮ**  Академический руководитель ОП  Р.В. Гончаров  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (подпись)  «\_\_\_\_»\_\_\_\_\_\_\_\_\_\_\_\_\_\_20\_\_\_\_ г. | | | | | | |  | | | Академическому руководителю образовательной программы «Управление пространственным развитием городов»  Высшей школы урбанистики им. А.А.Высоковского  Р.В. Гончарову  от студента (ки)\_\_\_ курса  образовательной программы «Управление пространственным развитием городов»  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (ФИО)  Контактные данные:  тел. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  e-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
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|  | | | | | **ЗАЯВЛЕНИЕ** | | | | | | |  | |
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| Прошу назначить консультантом моей выпускной квалификационной работы/ курсовой работы на тему «\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | |
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| (тема ВКР/КР) | | | | | | | | | | | | |
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| (ученая степень, научное звание, ФИО консультанта) | | | | | | | | | | | | |
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|  | | | | |  | | (подпись) | | | | | (ФИО студента) | |
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| **Виза руководителя:** | | | | | | | | | |  | |  | |
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| «\_\_\_\_\_» \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_ г. | | | | | | | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |
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| **Виза консультанта:** | | | | |  | |  | | |
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