Приложение 1

«УТВЕРЖДАЮ»

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(руководитель образовательной организации)

«\_\_\_\_\_\_» \_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20 г.

**Список обучающихся образовательной организации,**

**подлежащих социально-психологическому тестированию (с 12 лет)**

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(наименование образовательной организации)

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| № | ФИО обучающихся | Класс | Пол  м/ж | Количество полных лет | Наличие письменного информированного согласия |
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