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 *ime i prezime roditelja/ skrbnika*

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

  *adresa stanovanja*

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

 *telefon/mobitel*

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

*e-mail*

**OSNOVNA ŠKOLA RUŽIČNJAK**

 Donje Svetice 127, Zagreb

- Učiteljsko vijeće –

**PREDMET: ZAHTJEV ZA UPIS IZBORNOG PREDMETA**

Molim gornji Naslov da \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, učenici\_\_\_\_\_\_\_\_

 *(ime i prezime učenice; OIB)*

razreda, odobri upis izbornog predmeta\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

 *(upisati naziv izbornog predmeta)*

U Zagrebu, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 *potpis podnositelja zahtjeva*