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|  | | | | | | | | | **CORPO DE BOMBEIROS MILITAR**  **CENTRO DE ENSINO E INSTRUÇÃO DE BOMBEIROS**  **SEÇÃO DE CURSOS DE EXTENSÃO** | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| **ANOTAÇÃO DE RESPONSABILIDADE PROFISSIONAL - ARP** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  |  | | | | **Curso de Brigadista Eventual** | | | | | | | | | | | | | | | | | |  | | **Formação** | | | | | | | | | |  | |
|  |  | | | | **Curso de Brigadista Profissional** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  |  | | | | **Curso de Guarda-Vidas** | | | | | | | | | | | | | | | | | |  | | **Reciclagem** | | | | | | | | | |  | |
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| **Início:** | | | | | | | | |  | | | | | | | | **Término:** | | | | | |  | | | | | | | | | | |  |  | |
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| **Local:** | | | | | | | | |  | | | | | | | | **Horário:** | | | | | |  | | | | | **às** | | |  | | |  |  | |
| |  |  | | --- | --- | | **Empresa Contratante:** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| **EMPRESA ESPECIALIZADA NA FORMAÇÃO E TREINAMENTO** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Nome/Razão Social: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| E-mail | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| CNPJ: | | | | |  | | | | | | | | | Cadastro no CBMES: | | | | |  | | | | | Inscrição Municipal: | | | | | | | |  | | |  | |
| Endereço: | | | | | | | |  | | | | | | | | | | | | Nº: | |  | | Complemento: | | | | | | | |  | | |  | |
| Bairro: | | | | | | |  | | | | | | | | | | | | | Cidade: | | | |  | | | | | | | | UF: |  | |  | |
| CEP: | | | | |  | | | | | | | | Tel. Comercial: | | |  | | | | Tel. Celular: | | | | | |  | | | | | | | | |  | |
| E-mail: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| Responsável Técnico: | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |  | |
| CPF: | | | |  | | | | | | | | Identidade: | | |  | | | Org. Emissor: | | | |  | | | | | CR: | |  | | | | | |  | |
| **INSTRUTORES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| **Nome Completo do Instrutor** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **CPF** | | | | | |  | |
| **01** | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | |
| **02** | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | |
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| **04** | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | |
| **ALUNOS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
| **Nome do Aluno** | | | | | | | | | | | | | | | | | | | | | **EMAIL (do aluno)** | | | | | | | | | **CPF** | | | | |  | |
| **01** | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | |  | |
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Assinatura do Responsável Técnico