**ANEXO II**

**Formulário para Recurso ao Resultado Preliminar**

Nome Completo do Servidor(a): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FUNDAMENTAÇÃO E ARGUMENTAÇÃO LÓGICA DO RECURSO**

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Obrigatório anexar documentos comprobatórios, quando existentes.

Joinville \_\_\_\_/\_\_\_\_/\_\_\_\_

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(nome a assinatura do recursante)