**FOGLIO FIRME**

**DOCENTI del Consiglio di Classe**

**Studente:**

**Classe:**

**Anno scolastico 2024/25**

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| |  |  |  | | --- | --- | --- | | **DISCIPLINA** | **NOME/COGNOME** | **FIRMA** | | ITALIANO |  |  | | STORIA |  |  | | MATEMATICA |  |  | | L. INGLESE |  |  | | --------------- |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |

**Genitori (firma)**

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**STUDENTE (***se maggiorenne)*

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**DATA**

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