**OBRAZAC 1**

**OPĆINA LOVREĆ**

**Jedinstveni upravni odjel**

**Doktora Franje Tuđmana 7, 21 257 Lovreć**

**ZAHTJEV ZA OSTVARIVANJE PRAVA NA POTPORU ZA VANŠKOLSKE AKTIVNOSTI**

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| **IME I PREZIME****PODNOSITELJA \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****ZAHATJEVA** **ADRESA \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**OIB****TELEFON/****MOBITEL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****MAIL ADRESA \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****TEKUĆI RAČUN**

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**IBAN** **(u slučaju blokiranog računa, priložiti potvrdu FINA-e)** |

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| **IME I PREZIME DJETETA/DJECE** | **VANŠKOLSKA AKTIVNOST** |
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| **I Z J A V A**1. da su svi izneseni podaci istiniti,
2. da sam suglasan s obradom osobnih podataka shodno važećim propisima
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| **OBVEZNI PRILOZI:**• Rješenje/potvrda HZMO-a o ostvarenom pravu na doplatak za djecu za tekuću godinu,• Potvrda pružatelja vanškolske aktivnosti da dijete aktivno pohađa vanškolsku aktivnost,• Potvrda škole o statusu redovnog učenika osnovne/srednje škole za nastavnu 2024./2025. godinu,• Elektronički zapis o prebivalištu ili važeća osobna iskaznica za roditelja/skrbnika i dijete  |

Lovreć, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_2024.g.

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 potpis podnositelja zahtjeva