**RESOLUÇÃO Nº 7, DE 23 DE OUTUBRO DE 2023**

**ANEXO II - RELATÓRIO DE ACOMPANHAMENTO DE ATIVIDADES DO BOLSISTA**

RELATÓRIO DE ATIVIDADES DO SEMESTRE: \_\_\_\_\_\_\_\_\_\_

Nome do Discente: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Número de matrícula: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Curso: ( ) Mestrado ( ) Doutorado

Orientador(a): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ingresso no Curso: \_\_\_\_\_\_\_\_\_\_ Tempo de bolsa: \_\_\_\_\_\_\_\_ meses

1. Disciplinas cursadas desde o início do curso, inclusive do semestre em apreciação:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Disciplina** | **Código** | **Semestre** | **Créditos** | **Conceito** |
| **1** |  |  |  |  |  |
| **2** |  |  |  |  |  |
| **3** |  |  |  |  |  |
| **4** |  |  |  |  |  |
| **5** |  |  |  |  |  |
| **6** |  |  |  |  |  |

1. Comentários do bolsista sobre o andamento da dissertação ou tese, dificuldades encontradas e outros aspectos pertinentes:

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Assinatura do/a bolsista

Data: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3 - Parecer do orientador sobre o andamento do trabalho e do desempenho do bolsista:

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

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O(a) orientador(a) recomenda a renovação/continuidade dessa concessão de bolsa?

 ( ) SIM ( ) NÃO ( ) não se aplica

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

Assinatura do(a) orientador/a

Data: \_\_\_\_\_\_\_\_\_\_

**Parecer da Comissão de Bolsas:**

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

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Data: \_\_\_\_\_\_\_\_\_\_

**Parecer do Colegiado:**

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Data: \_\_\_\_\_\_\_\_\_\_