



<p>FORM/REQUEST</p> <p>MATERNITY AND PATERNITY BENEFITS (Order RT-43/2017 of 24 July, Articles 49 to 52)</p>	<p>Received on: ____/____/____</p> <p>By: _____</p>
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Full name: _____

Degree: _____ Student Number: _____

Request for:

- Excused absence, supported by the documents:
 - Birth certificate of the newborn
 - Certified adoption order
 - Medical statement/certificate stating the presented situation
 - Attestation of antenatal examinations
- Exam and assessment to the course units listed below (*only for pregnant women*)
- Postponement of presentation/delivery of works, and postponement of tests and exams of the course units listed below (*only for mothers and fathers with children up to 3 years of age*)

Course units

_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I hereby acknowledge the conditions described in Articles 49 to 52 of the Order RT-43/2017 of 24 July, which approves the Academic Regulation.

University of Minho, _____

Signature: _____