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| Rzeczpospolita Polska | | | | | | | | | | **URZĄD DO KTÓREGO KIERUJESZ WNIOSEK** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | SYMBOL/00/00 / Adnotacje urzędu | | | | | | | | | | | | | | | | | | | | | | | | |
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| **ZAWIADOMIENIE O ZAWARCIU UMOWY Z MŁODOCIANYM PRACOWNIKIEM**  **W CELU PRZYGOTOWANIA ZAWODOWEGO** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1. Instrukcja wypełnienia dokumentu** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. | | | | | | | | | | Wniosek złóż do urzędu gminy lub urzędu miasta właściwego dla miejsca zamieszkania młodocianego. Jeżeli jesteś rzemieślnikiem to powinieneś także zawiadomić izbę rzemieślniczą właściwą dla miejsca twojej siedziby. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. | | | | | | | | | | WYPEŁNIJ WIELKIMI LITERAMI. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. | | | | | | | | | | Pola wyboru oznaczaj  lub . | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. | | | | | | | | | | Wypełniaj kolorem **czarnym** lub **niebieskim**. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **2. Dane pracodawcy** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | **2.1. Dane identyfikacyjne** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | | | **2.2. Informacja o wpisie pracodawcy do rejestru przedsiębiorców** *(zaznacz właściwy rejestr)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | | |  | | | | | | Centralna Ewidencja i Informacja o Działalności Gospodarczej | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | Krajowy Rejestr Sądowy | | | | | | | | | | | |  | | | | Inny rejestr | | | | | | |
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|  | | | | | | | | | | *Gdy wybrałeś CEIDG wpisz NIP.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | **2.3. Adres siedziby lub miejsca zamieszkania pracodawcy** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Miejscowość | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | | | **2.4. Dane kontaktowe pracodawcy** *(dane kontaktowe nie są obowiązkowe, ale ułatwią kontakt w sprawie wniosku)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Adres poczty elektronicznej | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **3. Treść wniosku** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | **3.1. Dane identyfikacyjne młodocianego** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Imię i nazwisko | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Data i miejsce urodzenia | | | | | | | | | |  | | |  | | | | - | | |  | | | |  | | | - | | |  | | | |  | | |  | | |  | | | | |  | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | | | **3.2. Adres zamieszkania młodocianego** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Miejscowość | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Nr domu | | | | | | | | | |  | | | | | | | | | | | | | Nr lokalu | | | | | | | | | |  | | | | | | | | | Kod pocztowy | | | | | | | | | | | | |  | | |  | | | - | | | | |  | | |  | | |  | |
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|  | | | | | | | | | | **3.3. Cel zawarcia umowy (***zaznacz właściwe***)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  |  |  |  |  |  |  |  |  |  | W celu przygotowania do określonej pracy | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | | | **3.4. Informacje dot. umowy z młodocianym** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Data podpisania umowy | | | | | | | | | |  | | | |  | | | | | - | | |  | | | |  | | | - | | |  | | | |  | | |  | | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **4. Podstawa prawna** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| §3a rozporządzenia Rady Ministrów z dnia 28 maja 1996 r. w sprawie przygotowania zawodowego młodocianych i ich wynagradzania. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **5. Data i podpis wnioskodawcy** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Podpis | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |