



UFMG

DRCA - DEPARTAMENT OF REGISTRATION AND ACADEMIC CONTROL

REGISTRATION REQUEST
POST-DOCTORAL RESIDENCY (RPD)

REGISTRATION [FILLED IN BY DRCA]:

ACADEMIC YEAR/SEM. OF ENROLLMENT

PERSONAL INFORMATION

NAME CPF (TAXPAYER #)

GENDER MARITAL STATUS
M F Single Married Divorced Widow(er) Not Specified

BIRTH INFORMATION
DATE CITY STATE COUNTRY

FATHER'S NAME:

MOTHER'S NAME:

NATIONALITY STATUS
Native Brazilian Naturalized Brazilian Foreigner COUNTRY(if foreigner):

IDENTITY DOCUMENT (Brazilians only) ISSUER STATE

FOREIGNER IDENTIFICATION AND IMMIGRATION STATUS
PASSAPORT OR RNE EXPIRY DATE CLASSIFICATION OF ENTRY VISA IN BRAZIL
ENTRY VISA GRANT DATE ENTRY VISA EXPIRY DATE ENTRY VISA EXTENSION(S)

ADDRESS (fill in with home address in Brazil)
ADDRESS (Street, Avenue, Square, etc.) # COMPLEMENT DISTRICT
CITY STATE CEP (POSTAL CODE) PHONE NUMBERS

ADDITIONAL INFORMATION
Would you like to inform your race/color? Yes Which? No

How do you assess your skills to:
1. See: 2. Hear: 3. Walk:
Unable Permanent great difficulty Some permanent difficulty No permanent difficulty

Do you have any of the following disabilities?
Total permanent paralysis Leg Permanent Paralysis None of the above
Permanent paralysis of one of the sides of the body Missing a leg, arm, hand, foot, or thumb

INFORMATION ABOUT THE DOCTORATE DEGREE
COMPLETION PERIOD COURSE

UNIVERSITY:
CITY STATE/PROVINCE/DISTRICT/ETC. COUNTRY

RESIDENCY APPROVAL AND ENROLLMENT AT UFMG

[exclusively filled in by the postgraduate program secretary* where the residency will be carried out]

RESIDENCY APPROVED AT THE POSTGRADUATE COLLEGIATE MEETING ON: / /

ENROLLMENT COURSE
CODE NAME
ENROLLMENT PERIOD
RESIDENCY START DATE: / /

SUPERVISOR PROFESSOR
INA (optional) FULL NAME
RESIDENCY END DATE: / /
PLEASE CHECK OUT THE PERIOD LIMITS PROVIDED IN RESOLUTION AND EXTENSION CONDITIONS.

*. ALL THE SECRETARY-FILLED FIELDS (EXCEPT INA) ARE MANDATORY. FOR FURTHER INFORMATION, CHECK OUT RES. 02/2017-UNIVERSITY BOARD.

RESIDENT'S SIGNATURE
FILLED ON: / /

PROGRAM SECRETARY'S SIGNATURE
REQUEST DATE: / /

NOTES [FILLED IN BY DRCA]: