

Ministério da Educação

Secretaria de Educação Profissional e Tecnológica

Instituto Federal de Educação, Ciência e Tecnologia do Rio Grande do Sul

*Campus* Sertão

**PARECER DE AVALIAÇÃO DE TRABALHO DE CONCLUSÃO DE CURSO (TCC)**

Eu, Prof. (a) , membro da banca examinadora à distância do trabalho de conclusão de curso do(a) estudante , emito o parecer abaixo e encaminho ao(à) presidente da respectiva banca para fins de registro de minha participação na sessão de defesa.

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Assinatura do(a) professor(a) avaliador(a)

Em / /