**Nursery School Las Claras de La Flota**

C/ Músico Antonio Rodríguez de Hita, 9

30007 - MURCIA

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**Verificación anual de los datos de los alumnos**

Curso escolar:

Grupo:

**Datos del alumno/a**

**Observaciones médicas (alergias, medicamentos, ...)**

Datos comprobados y autorizaciones otorgadas por:

Nombre (legible) y firma

Fecha: \_\_\_\_/\_\_\_\_/\_\_\_\_\_

Nombre y apellidos:

Fecha de nacimiento:

Localidad de nacimiento:

Nacionalidad:

DNI/Pasaporte:

Teléfonos:

Móvil:

NSS

N. hermanos (ella incluida):

Posición dentro de los hermanos:

Idioma familiar:

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Nombre y apellidos:

Fecha de nacimiento:

País de nacimiento:

Dirección:

DNI/Pasaporte:

Profesión:

Empresa:

NSS:

Teléfonos:

Móvil:

Correo electrónico:

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**Tutor 1**

Nombre y apellidos:

Fecha de nacimiento:

País de nacimiento:

Dirección:

DNI/Pasaporte:

Profesión:

Empresa:

NSS:

Teléfonos:

Móvil:

Correo electrónico:

**Tutor 2**

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Nombre Titular:

IBAN

**Datos bancarios**

En cumplimiento de lo establecido en la Ley Orgánica 15/1999, de 13 de Diciembre, de Protección de Datos de Carácter Personal, consiente de manera expresa e inequívoca para la publicación de la imagen de su hijo/a, entendida esta como de carácter personal, con la finalidad de ser publicada en la revista y la Web del Centro.

En cumplimiento de lo establecido en la LOPD, y el Real Decreto 1720/2007, de 21 de Diciembre, por lo que se aprueba el Reglamento de desarrollo de la misma, el interesado puede ejercitar en cualquier momento, los derechos de acceso, rectificación, cancelación u oposición dirigiéndose a COOPERATIVA DE ENSEÑANZA LA FLOTA MURCIA, C/ Músico Antonio Rodríguez de Hita Nº 9 C.P. 30007 Murcia, adjuntando fotocopia de su DNI.

**SI**