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| Facultatea/Departamentul………………. | | | | | | |  | |  |  | |  | | | |  | | |  | |  | |
| Compartiment | | | | | | |  | |  |  | |  | | | |  | | |  | |  | |
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| Nr……………………. | | | | | | |  | |  |  | |  | | | | RECTOR , | | | | | | |
|  | |  |  | | | |  | | **NOTA DE CHEMARE** | | |  | | | | ……………. | | | …………… | |  | |
|  |  |  | | | | pentru efectuarea orelor suplimentare in perioada ……. | | | | | | | | |  | | | |  | |  | |
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|  | **Nr. crt.** | **Numele şi prenumele** | | | **Ocupatia** | | **Marca** | | **Lucrarea şi motivul desfăşurării lucrarii în afara programului normal de lucru** | | | **Interval de timp** | | **Conditie ore suplimentare** | | | | | **Semnatura** | | **Observaţii/**  **Programare recuperare** | |
|  | 1 |  | | |  | |  | |  | | |  | | **Recuperare în următoarele 60 de zile lucratoare, conform CM şi CCM** | | | | |  | |  | |
|  | 2 |  | | |  | |  | |  | | |  | |  | |  | |
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|  |  | **Viza responsabil ,,n”** | | |  | | | | | | |  | |  | | **Viza responsabil ,,n-1”** | | | | |  | |
|  | **Se completează în două exemplare, din care unul se transmite la Serv. ORu** | | | | | | | | | | | | |  | |  | |  | | |  | |