

**FORMULÁRIO - SUBMISSÃO DE MOÇÕES**

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| **Data:** \_\_\_\_/\_\_\_\_\_/2019**Tipo de Moção:**1. ( ) Moção de Apoio
2. ( ) Moção de Proposição
3. ( ) Moção de Repúdio
4. ( ) Moção de Denúncia

**Esfera de atuação do destinatário da Moção**:1. ( ) Governo Federal
2. ( ) Governo Estadual
3. ( ) Governo Municipal
4. ( ) Sociedade Civil
5. ( ) Judiciário
6. ( ) Legislativo
7. ( ) Outros \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(escrever)*

**Proponente responsável:**1. ( ) Pessoa Física
2. ( ) Coletivo/ Associação de imigrantes
3. ( ) Organização de apoio a imigrantes

Nome da organização: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Nome da pessoa: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Se for pessoa física, indicar nacionalidade: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Assunto da moção:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Texto da moção:**

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