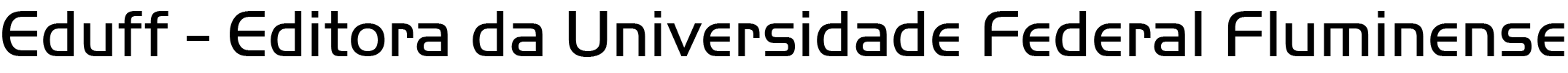


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**Nome completo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Nacionalidade: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Est. Civil: \_\_\_\_\_\_\_\_\_\_\_\_ Profissão: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

RG: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Órgão: \_\_\_\_\_\_\_\_\_\_\_\_ CPF: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Data de nasc.: \_\_\_\_\_\_\_\_\_\_

Endereço residencial completo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CEP: \_\_\_\_\_\_\_\_\_

Tel.: (\_\_ ) \_\_\_\_\_\_\_\_\_\_\_\_\_ Celular: (\_\_ ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2o celular: (\_\_ ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Endereço profissional completo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CEP: \_\_\_\_\_\_\_\_\_

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# Docente da UFF – Ativo [ ] Aposentado [ ]

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Cargo ou função: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIAPE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**RECURSOS PARA PUBLICAÇÃO**

[ ] NÃO [ ] SIM MONTANTE DE RECURSOS: R$ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

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ANO DE COMPROVAÇÃO PARA OBRAS DE PÓS-GRADUAÇÃO COM PROJETOS VINCULADOS À PUBLICAÇÃO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

PUBLICAÇÃO E VALOR NA OUTORGA E ACEITAÇÃO (no documento de auxílio para publicação): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ANEXAR COMPROVANTE DO REPASSE FINANCEIRO À EDUFF.

**IMPORTANTE**: Anexar Termo de Outorga da agência ou programa financiadores, caso haja.

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TIRAGEM (em caso de suporte impresso): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DISPONIBILIZAÇÃO: [ ] Gratuito [ ] Comercial

Faz parte de alguma coleção? \_\_\_\_\_\_\_ Qual? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**B) DADOS DO ORIGINAL**

**1.TÍTULO**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**2. ÁREA DE CONHECIMENTO**:

[ ] Ciências Exatas e da Terra [ ] Ciências Ambientais

[ ] Ciências da Saúde [ ] Ciências Sociais Aplicadas

[ ] Ciências Agrárias [ ] Engenharias – Tecnologias

[ ] Ciências Humanas [ ] Linguística e Letras

[ ] Ciências Biológicas [ ] Artes

[ ] Outra - Especifique \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Subárea:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**3. GÊNERO:**

Tese[ ] Dissertação [ ] Ensaio [ ] Coletânea de artigos [ ] Outro [ ] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

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**6. PÚBLICO PREFERENCIAL A QUE SE DESTINA**:

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**7. RAZÕES PRINCIPAIS DO PROPONENTE QUE JUSTIFICAM A PUBLICAÇÃO:**

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**DADOS COMPLEMENTARES:**

**8. COORGANIZADORES(AS) – Caso haja**

**Nome completo**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nacionalidade: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Est. Civil: \_\_\_\_\_\_\_\_\_\_\_\_ Profissão: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Tel.: ( \_\_ ) \_\_\_\_\_\_\_\_\_\_\_\_\_ Celular: ( \_\_ ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2o celular: ( \_\_ ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Endereço profissional completo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CEP: \_\_\_\_\_\_\_\_\_

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**Nome completo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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Endereço residencial completo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CEP: \_\_\_\_\_\_\_\_\_

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Endereço profissional completo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CEP: \_\_\_\_\_\_\_\_\_

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**Nome completo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Nacionalidade: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Est. Civil: \_\_\_\_\_\_\_\_\_\_\_\_ Profissão: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

RG: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Órgão: \_\_\_\_\_\_\_\_\_\_\_\_ CPF: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Data de nasc.: \_\_\_\_\_\_\_\_\_\_

Endereço residencial completo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CEP: \_\_\_\_\_\_\_\_\_

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Endereço profissional completo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CEP: \_\_\_\_\_\_\_\_\_

E-mail (1): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail (2): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**9. COAUTORES (AS) – Se houver**

**Nome completo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Nacionalidade: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Est. Civil: \_\_\_\_\_\_\_\_\_\_\_\_ Profissão: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Endereço residencial completo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CEP: \_\_\_\_\_\_\_\_\_

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**Nome completo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**10. OUTRAS INFORMAÇÕES**:

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Niterói (RJ), \_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Assinatura do proponente

***IMPORTANTE***:

No caso de obra coletiva, o(s) organizador(es) deve(m) possuir autorização para publicação dos autores dos textos nela incluídos, que será necessária para a assinatura do contrato, caso a proposta seja aceita.

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