**OSNOVNA ŠKOLA**

**B O R O V J E**

**Zagreb, Davora Zbiljskog 7**

***Tel: 01 / 63 31 521, Fax: 01 / 63 31 530, e-mail: osnovna.skola.borovje@zg.t-com.hr***

Klasa: 602-02/13-17/

Ur. broj: 251-435-13-01

ZAHTJEV

Za izdavanje jedinstvenog korisničkog identitete (AAI) u sustavu CARNET-a

Za osobu\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OIB\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

RAZRED\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADRESA\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

KONTAKT\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Potpis Datum

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