**ANEXO 2**

**(Caráter Eliminatório)**

**FORMULÁRIO “MANIFESTAÇÃO DE INTERESSE E INFORMAÇÕES PESSOAIS”**

**1. Formula uma carta de intenções em, no máximo, 25 linha, tomando como base as questões abaixo:**

1. Como soubeste do Projeto Rondon?
2. Qual o teu interesse/motivação em participar da Operação Rondônia Cinqüentenário?
3. Qual a tua experiência prévia em ações e projetos de extensão universitária que estejam relacionadas às atividades realizadas na Operação Rondon?
4. Quais as tuas características pessoais que te qualificam para compor a equipe da UFPEL?
5. Quais as contribuições que tu aportarás à equipe no desenvolvimento dos trabalhos na Operação?
6. Quais são os teus diferenciais em relação às demais pessoas do teu grupo de convívio (no teu curso de graduação e na tua faixa etária)

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2. Cita 5 palavras que melhor te representam:**

**3. O que te deixa irritado? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**- Apresentas alguma restrição ou particularidade na alimentação? ( ) não ( ) sim Qual:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**- Necessitas de medicação contínua? ( ) não ( ) sim Qual:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**- És portador de alguma doença crônica? ( ) não ( ) sim Qual:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**4. Dentre as características abaixo, assinale as que te representam:**

**( ) proativo ( ) eufórico ( ) animado ( ) comprometido**

**( ) egoísta ( ) mimado ( ) triste ( ) sereno**

**( ) individualista ( ) depressivo ( ) otimista ( ) sonhador**

**( ) caridoso ( ) paciente ( ) bravo/nervoso ( ) colaborativo**

**( ) carente ( ) emotivo ( ) indeciso ( ) protetor**

**5. Há alguma outra informação que tu julgas importante mencionar?**

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