RECADASTRAMENTO

Dados Cadastrais

Identificação

|  |  |  |  |
| --- | --- | --- | --- |
| Matrícula |  | CPF |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_.\_\_\_\_\_.\_\_\_\_\_-\_\_\_\_ |
| Nome |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| RG |  | Órgão Emissor |  | Data Expedição |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_/\_\_\_\_ | \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_ |
| Data Nascimento |  | Sexo | ⃝ Masculino |
| \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_ | ⃝ Feminino |
| Estado Civil |  | Data Casamento |  |
|  | \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_ |
| Naturalidade |  | UF |  |
|  |  |

Contato Particular

|  |  |  |  |
| --- | --- | --- | --- |
| Telefone Residencial |  | Telefone Celular |  |
| (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | (\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Email 01 |  | Email 02 |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Filiação

|  |  |
| --- | --- |
| Mãe |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Pai |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Endereço Residencial

|  |  |  |  |
| --- | --- | --- | --- |
| CEP |  | Tipo Logradouro (Rua, Av, Estrada, Travessa, Beco, ETC.) |  |
| \_\_\_\_\_\_\_\_\_\_\_\_-\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Logradouro |  | Nº |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Bairro |  | Cidade |  | UF |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_ |
| Complemento |  | Ponto de Referência |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Lotação (Aposentados e pensionista, favor marcar o local mais próximo ou que tenham mais facilidade/afinidade para participar de reuniões, encontros, festas, etc)

|  |  |
| --- | --- |
| Lotação |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Outros

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Escolaridade |  | Curso Acadêmico |  | PISPasep |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Situação Funcional

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Situação Funcional | ⃝ Ativo ⃝ Inativo  | Data de Admissão |  | Data Aposentadoria |  |
| ⃝ Pensionista | \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_ | \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_ |

Informações Bancárias

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Agencia |  | Conta |  | Banco |  |
|  |  |  |

Correspondências

|  |  |
| --- | --- |
| Enviar correspondências para |  ⃝ Endereço Residencial ⃝ Delegacia/Sede da PRF |

Dependentes

|  |  |  |  |
| --- | --- | --- | --- |
| Nome |  | Parentesco |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Data Nascimento |  | Sexo | ⃝ Masculino |
| \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_ | ⃝ Feminino |
| CPF |  | RG |  |
| \_\_\_\_\_.\_\_\_\_\_.\_\_\_\_\_-\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Nome da Mãe |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| --- | --- | --- | --- |
| Nome |  | Parentesco |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Data Nascimento |  | Sexo | ⃝ Masculino |
| \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_ | ⃝ Feminino |
| CPF |  | RG |  |
| \_\_\_\_\_.\_\_\_\_\_.\_\_\_\_\_-\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Nome da Mãe |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| --- | --- | --- | --- |
| Nome |  | Parentesco |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Data Nascimento |  | Sexo | ⃝ Masculino |
| \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_\_ | ⃝ Feminino |
| CPF |  | RG |  |
| \_\_\_\_\_.\_\_\_\_\_.\_\_\_\_\_-\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Nome da Mãe |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Instituidor (Somente Pensionista)

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| --- | --- | --- | --- |
| Nome Instituidor |  | Matrícula |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Plano de Saúde e Seguro de Vida

|  |  |
| --- | --- |
| Plano de Saúde | ⃝ Não Possui ⃝ Geap ⃝ Unimed IBBCA ⃝ Unimed ⃝Unimed Elo (ex-Tocantins)  |
| ⃝ Medial ⃝ Outro (especificar) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Situação no plano | ⃝ Titular  |
| ⃝ Dependente |
| Seguro de Vida(Especificar) |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |