**Se aprobă,**

Director Executiv

**1. Solicitant (nume,prenume):** ………………………………………................................................. **Date de contact:** ……………………………………………………………………………………...... **(adresă, nr.telefon)**

**2. Expunerea,pe scurt, a obiectului audienţei solicitate.**

……………………………………………………………………………………………………………..

……………………………………………………………………………………………………………..

......................................................................................................................................................................

......................................................................................................................................................................

......................................................................................................................................................................

**3. Măsuri propuse în urma audienţei.**

......................................................................................................................................................................

......................................................................................................................................................................

......................................................................................................................................................................

......................................................................................................................................................................

**4. Persoana care a acordat audienţa anterioară si masurile luate (dacă este cazul)**

......................................................................................................................................................................

......................................................................................................................................................................

**Data**

**.................**

**Semnatura solicitant**

**Numele si prenumele persoanei care a preluat fisa**

Data la care a fost programata audienta

Semnatura