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|  | | **Attest tot aanvraag van uitstel van het terugkommoment vanwege beroep of dienst in het buitenland** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | MOW-06-211118 | | | |
|  | | //////////////////////////////////////////////////////////////////////////////////////////////////////////////////////////////////////////////////////////// | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Departement Mobiliteit en Openbare Werken  **Toegepast Mobiliteitsbeleid**  [www.vlaanderen.be/terugkommoment](http://www.vlaanderen.be/terugkommoment) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | **In te vullen door de deelnemer** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | **Persoonlijke gegevens** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | voor- en achternaam | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | rijksregisternummer | | | | | | |  | | | | | | |  |  | | |  |  | |  | | | | | | | | | | | | | | | | |
|  | | telefoonnummer | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | e-mailadres | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | **Gegevens van het terugkommoment** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | |  | Ik heb geen afspraak gemaakt voor het terugkommoment. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | Ik heb een afspraak voor het terugkommoment gemaakt op : | | | | | | | | | | | | | | | | | | | | | | dag | |  | | maand | |  | jaar | |  | | |  | | |
|  | | | | Bij welke instelling? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | **Ondertekening** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | **Ik verklaar dat ik niet naar het terugkommoment kan komen vanwege mijn beroep of dienst in het buitenland, en dat ik uitstel aanvraag.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | datum | | | | | | | dag | | |  | | | | | maand | | | |  | | jaar |  | | | |  | | | | | | | | | | | |
|  | | handtekening | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | **In te vullen door de militaire overheid, de burgerlijke overheid of de werkgever** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | **Gegevens van de organisatie** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | naam | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | ondernemingsnummer | | | | | | | |  | | | . | |  | | | . |  | | |  | | | | | | | | | | | | | | | | | |
|  | | voor- en achternaam directeur of leidinggevende | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | straat en nummer | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | postnummer en gemeente | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | e-mailadres | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | **Begin- en einddatum van de periode waarin de deelnemer het terugkommoment niet kan volgen vanwege zijn beroep of dienst in het buitenland** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | van | | | | dag |  | maand |  | | | jaar | | |  | | | | | | tot en met | | | | | | dag | |  | | maand | | |  | | jaar | | |  |  |
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|  | | **Ondertekening** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | **Als directeur of leidinggevende verklaar ik dat de deelnemer in het buitenland verblijft om beroeps- of dienstredenen, en dat het voor de deelnemer gedurende de bovenvermelde periode onmogelijk is om het terugkommoment te volgen.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | handtekening | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |