**APÊNDICE IV - RELATÓRIO FINAL DE ATIVIDADES**

Nome do Monitor(a) ..................................................................................................................................  
Curso(s): ...................................................................................................................................................  
Fase: .........................................................................................................................................................  
Nome do(a) Professor(a) Orientador(a): .................................................................................................  
Disciplina(s): .............................................................................................................................................  
Departamento: ..........................................................................................................................................  
Centro: ......................................................................................................................................................  
Período: ............/............./............... a ........./............/.............  
Carga horária de atividade: ......................................................................................................................  
Modalidade de monitoria: ( ) remunerada ( ) voluntária  
AVALIAÇÃO DO DISCENTE  
1.Atividades desenvolvidas e resultados alcançados:  
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2-Dificuldades encontradas:  
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Local e data Assinatura do Monitor(a)  
AVALIAÇÃO DO DOCENTE  
Quanto ao desempenho do(a) monitor(a), tomando por base os critérios a seguir:  
I – auxílio do professor(a) em tarefas pedagógicas e científicas, inclusive na preparação de aulas,  
trabalhos didáticos e atendimento;  
II – auxílio do(a) professor nos trabalhos práticos e experimentais da disciplina;  
III – auxílio dos demais acadêmicos, orientando-os em trabalhos de laboratório, de biblioteca, de  
campo e outros compatíveis com o seu grau de conhecimento e experiência.  
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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Local e data: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Assinatura do(a) Professor(a) Orientador(a) |