**ANEXO III**

**QUESTIONARIO DE AUTOAVALIAÇÃO**

**ATENÇAO! Antes de preencher esse formulário, recomendamos que entre em contato com o possível professor orientador no PGEEC (a relação de professores do curso está disponível na página do programa, com os respectivos endereços de e-mail)**

Nome do (a) professor (a) contatado (a): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Nome do (a) candidato (a): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Interesse pelo Curso**

Dedicação ao curso: ( ) Integral ( ) Parcial

Escolha uma área de atuação na qual pretende desenvolver seus estudos:

|  |  |
| --- | --- |
| **Área de Atuação** | **Assinale “X”** |
| Sistemas Elétricos de Potência |  |
| Controle, Automação e Sistemas industriais |  |
| Inteligência Computacional |  |
| Sistemas Biomédicos |  |

Descreva sucintamente sua experiência prévia em atividades de pesquisa.

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Por que você deseja realizar o Curso de Mestrado no PGEEC?

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*(Caso necessário, utilize folhas adicionais)*

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Assinatura do (a) candidato (a)