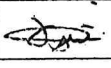
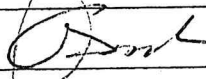
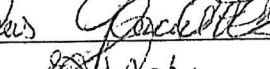
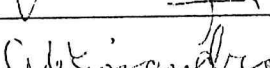
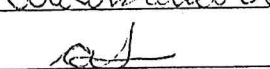
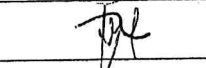
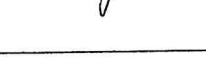


LISTA DE PRESENÇA DE REUNIÃO OU CAPACITAÇÃO

Empresa:	Hospital Regional de Coxim		
Treinamento:	Apresentação Pontuação nº 10 / 2026		
Data:	5/5/26	Carga horária:	
Metodologia:		Turno:	6X11 (AV) () N
Instrutor:	Susana Guerra, Gpi	Assinatura:	
Qualificação:			

CONTEÚDO PROGRAMÁTICO		

PARTICIPANTES		
Nº	NOME COMPLETO	ASSINATURA
01	Orlando de Souza Silva	
02	Leiane de Souza	
03	Gluciele Fernandes Campos Pedagogos	
04	Elizângela Alves!	
05	Julio Rhes P. do Silva	
06	Dr. Sulzbach.	
07	Altirandrea R. de Costa	
08	Alessandra dos Santos Silva	
09	Danielle Franco Rave	
10		
11		
12		
13		
14		