Departamento de Ciencias de la Tierra

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| Período escolar: | {period} | Fecha: | {docdate} |

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| No. | Empresa / Ciudad | Objetivo de la visita | Fecha y hora | Carrera | No. de estudiantes | Semestre | Solicitante  Asignatura |
| {number} | {enterprise\_city} | {objective} | {date} | {career} | {numberstudents} | {semester} |  |
| Diseño II |
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| **NOMBRE Y FIRMA**  **PRESIDENTE (A) DE ACADEMIA** |  | **NOMBRE Y FIRMA**  **JEFE(A) DEL DEPARTAMENTO ACADEMICO** |  | **Vo. Bo.**  **NOMBRE Y FIRMA**  **SUBDIRECTOR(A) ACADÉMICO** |

c.c.p. Subdirección de Planeación y Vinculación.

c.c.p. Subdirección de Servicios Administrativos.