|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Diploma | | | | |
| Certifica que: | | | | |
| PARTICIPANTE | | | | |
| Ha finalizado con éxito el evento EVENTO | | | | |
| FECHA | | | | |
|  |  |  | PARTICIPANTE |  |
|  | DIRECTOR | Firma participante |  |