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| **NOMBRE COMPLETO DEL ALUMNO:** |  | | | |
| **CARRERA:** | | | **SEMESTRE:** | **MATRÍCULA:** |
| **INSTITUCIÓN Y/O DEPENDENCIA :** |  | | | |
| **NOMBRE DEL PROGRAMA O PROYECTO :** |  | | | |
| **PERIODO DEL:** | | **AL:** | | |
| **OBJETIVO:** | | | | |
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| **NÚM.** | **ACTIVIDAD** | **DEL:** | | | | | | | | **AL:** | | | | | | | | **NÚMERO DE HORAS POR ACTIVIDAD** |
| D | D | M | M | A | A | A | A | D | D | M | M | A | A | A | A |
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| TOTAL DE HORAS | | | | | | |  | |
| **Firma del alumno** |  | **Responsable inmediato (firma y sello)** | |  |  |  | |  | |
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