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**UNIVERSIDAD DEL VALLE DE GUATEMALA**

**CAMPUS SUR**

**REPORTE DE ACCIDENTALIDAD**

**CORRESPONDIENTE AL MES DE: CICLO ESCOLAR 2,010**

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| **No.** | **NOMBRE** | **PERSONA** | | **DESCRIPCION** | **REGION** | **CAUSA** | **EDAD** | **SEXO** | | **FECHA** | **PROGRAMA** |
|  |  | **ALUMNO** | **TRABAJADOR** | **DEL GOLPE** |  |  |  | **M** | **F** |  |  |
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**SANTA LUCIA COTZUMALGUAPA, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Fecha de entrega

Licda Rocío Bran de Debroy

**DIRECTORA ADMINISTRATIVA**