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| **Anexo 14** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **FORMATO DE SEGUIMIENTO DE LA TRAYECTORIA ACADÉMICA**  **PROGRAMA INSTITUCIONAL DE TUTORIA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **INSTITUTO TECNOLOGICO SUPERIOR DE LA SIERRA NEGRA DE AJALPAN** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **CARRERA:** | | |  | | | | | | |  | | | | | | |  | | | | | | |  | | | | | | | |  | | | | | | |  | | | | | | |
| **Semestre:** | | |
| **Evaluación parcial:** | | | 1. COMPETENCIA NO ALCANZADA | 2. INASISTENCIAS | 3. INDISCIPLINA | 4. NO ENTREGA TRAB/PRACT | 5. APOYO PSICOLOGICO | 6. APOYO ECONOMICO (BECA) | 7. OTRO | 1. COMPETENCIA NO ALCANZADA | 2. INASISTENCIAS | 3. INDISCIPLINA | 4. NO ENTREGA TRAB/PRACT | 5. APOYO PSICOLOGICO | 6. APOYO ECONOMICO (BECA) | 7. OTRO | 1. COMPETENCIA NO ALCANZADA | 2. INASISTENCIAS | 3. INDISCIPLINA | 4. NO ENTREGA TRAB/PRACT | 5. APOYO PSICOLOGICO | 6. APOYO ECONOMICO (BECA) | 7. OTRO | 1. COMPETENCIA NO ALCANZADA | 2. INASISTENCIAS | 3. INDISCIPLINA | 4. NO ENTREGA TRAB/PRACT | 5. APOYO PSICOLOGICO | 6. APOYO ECONOMICO (BECA) | 7. OTRO | 1. COMPETENCIA NO ALCANZADA | | 2. INASISTENCIAS | 3. INDISCIPLINA | 4. NO ENTREGA TRAB/PRACT | 5. APOYO PSICOLOGICO | 6. APOYO ECONOMICO (BECA) | 7. OTRO | 1. COMPETENCIA NO ALCANZADA | 2. INASISTENCIAS | 3. INDISCIPLINA | 4. NO ENTREGA TRAB/PRACT | 5. APOYO PSICOLOGICO | 6. APOYO ECONOMICO (BECA) | 7. OTRO |
| **Mes:** | | |
| **Tutor:** | | |
| **Grupo: Aula:** | | |
| **No de Control** | | **Nombre del estudiante** |
| 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 14 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 15 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| **OBSERVACIONES:** |
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**INSTRUCCIONES DE LLENADO**

1. Marque con una “X” en el espacio correspondiente a la incidencia del estudiante en cada asignatura de acuerdo a la información recabada y anote en observaciones la descripción de la sesión.
2. Escriba a continuación el número de sesiones individuales o grupales de Tutoría. Sesiones Individuales ( ) Sesiones grupales ( )

**NOTAS**

* Este reporte deberá ser llenado por el tutor
* Deberá ser entregada al Coordinador de Tutoría del Departamento Académico con copia para el tutor.
* Anotar cada evento que dificulte el alcance de la competencia y que estrategia se utilizó para lograrlo.

Fecha:

Firma del tutor: Firma del Coordinador de Tutoría del Departamento Académico \_