**FORMATO DE VACACIONES**

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| NOMBRES Y APELLIDOS: |  | | | | | | |
| CARGO: |  | | | | | | |
| AREA: |  | | | | | | |
| FECHA DE INGRESO: |  | | | | | | |
| PERIODO DE VACACIONES: |  | | | | | | |
| DEL: |  | | | AL: | | | |
| DIA DE REINCORPORACION: |  | | | | | | |
| OBSERVACIONES: |  | | | | | | |
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| Aprobado por: office Supervisor | |  |  | Firma del trabajador | | |  |
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