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|  | **SUBSECRETARÍA DE EDUCACIÓN MEDIA SUPERIOR**  **DIRECCIÓN GENERAL DE CENTROS DE FORMACIÓN PARA EL TRABAJO**  **REGISTRO DE EVALUACIÓN POR SUBOBJETIVOS**  **(RESD-05)** |

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| UNIDAD DE CAPACITACIÓN | | | {nombre\_unidad} | | CCT | {clavecct} | | | CICLO ESCOLAR | | {anio} | | | GRUPO | |  | MES | {mes\_inicio} | | | | AÑO | {anio} |
| CFP | {cfp} | | | ESPECIALIDAD | | | {especialidad} | | | CURSO | | | {nombre\_curso} | | | | | | | | CLAVE | | {clave\_curso} |
| FECHA DE INICIO | | {fecha\_inicio} | | FECHA DE TERMINO | | | | {fecha\_fin} | | | | HORARIO | | | {horario} | | | | CURP | {curp\_instructor} | | | |

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| No | NÚMERO  DE  CONTROL | NOMBRE DEL CAPACITANDO  PRIMER APELLIDO / SEGUNDO APELLIDO / NOMBRE (S) | CLAVE DE CADA SUBOBJETIVO | | | | | | | | | | | | | | | | | | RESULTADO  FINAL |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| RESULTADO | | | | | | | | | | | | | | | | | |
| {#inscritos}{num} | {num\_control} | {nombre\_persona}{/inscritos} |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| NOMBRE Y FIRMA  INSTRUCTOR |  | SELLO |