**ANEXOS DE ETAPA N°1, DIAGNÓSTICO Y SELECCIÓN.**

**ANEXO N°1-A, DIAGNÓSTICO Y SELECCIÓN DE APLICACIÓN GENERAL.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Programa | Talento digital para chile | | | Código del curso | BOTIC-SOFOF-23-30-13-0094 | | |
| Nombre del Curso | | Desarrollo de Aplicaciones Full Stack JavaScript Trainee V2.0 | | Organismo Ejecutor | EDUTECNO | | |
| Nombre del Tutor ASL | | | Katherine Morán. | Fecha de la entrevista |  |  | 2024 |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| IDENTIFICACIÓN DEL PARTICIPANTE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Nombre del participante | | | | | | | | | | | | | | | | | | | | | | Jose Oscar Uribe guzmán. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | RUT del participante | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 10713621-5 | | | | | | | | | | | | | | | | | | | | | | |
| Fecha de nacimiento | | | | | | | | | | | | | | | | | | | 12 | | | | | | | | | | | 09 | | | | | | | | | 1967 | | | | | | | | | | | | | Edad | | | | | | | | | | | | 57 | | | | | | | | | | | | | Nacionalidad | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | chileno | | | | | | | | | | | | | | | | | | | | | | | | |
| Domicilio | | Pasaje Raúl Castro 748 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | ciudad | | | | | | | | | | | | | | | | | | | Coronel | | | | | | | | | | | | | | | | | | | | | | | | |
| Correo Electrónico | | | | | | | | | | | Boldo1266@gmail.com | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Teléfono | | | | | | | | | | | | | | | | | | | 930759508 | | | | | | | | | | | | | | | | | | | | | | | | |
| Tipo(s) de discapacidad | | | | | | | | | | | | | | | | | | | no | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Registro de discapacidad (%) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | no | | |
| Nivel de estudios | | | Básicos | | | | | | | | | | | | | | | | | | | Medios | | | | | | | | | | | | | | | | | | | CH | | | | | | | | | | | | | | | | | | Superior | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Último curso aprobado | | | | | | | | | | | | | | | | | | | | | | | | | | Cuarto medio. | | | | | | | | | | | | | |
| TP | | | | | | | | | | | | | | | | | |
| Egresado de cuarto medio de educación técnico profesional | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | SI | | | | | | | | | | NO | | | | | | | | | | | | | | Cursando cuarto medio | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | SI | | | | | NO | | |
| Interés por nivelar o completar estudios | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | SI | | | | | | | | | | NO | | | | | | | | | | | | | De qué tipo | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | universitario | | | | | | | | | | | | | |
| Uso computador | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | Avanzado | | | | | | | | | | | | | | | | | | | | Licencia de conducir | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | SI | | | | | | | | | |  | | | | | | Otro idioma | | | | | | | | | | | | | | | | | | | | | no | | | | | | | |
| SITUACIÓN PERSONAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Jefe/a de Hogar | | | | SI | | | | | | | | | | |  | | | | | | | | | Personas dependientes de Ud. (menores, adultos mayores, PeSD) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | si | | | Edades | | | | | | | | | | | | 11 - 40 | | | | | |
| Situación Familiar | | | | | | | | | | (otras personas dependientes a su cargo, edades, pareja, situación laboral de la pareja) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ¿Quién aporta el principal ingreso en el hogar? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Su madre | | | | | | | | | | | | | | | | | Su padre | | | | | | | | | | | | | | | | | Su cónyuge/pareja | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Usted | | | | | | | | | | | | Otro | | | | | | |
| Recibe algún subsidio del Estado | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | NO | | | | | | | | ¿Cuál? | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Monto | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
| Es parte del Subsistema Chile seguridades y oportunidades | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | NO | | | | | | | | | | | | Certificado que lo acredita | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | NO | | |
| Cómo describiría su salud | | | | | | | | | | | | | | | | | | | | bbuena | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | Justifique | | | | | | | | | | | | | | | | | | | | | | | | | Sin problemas mayores. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Observaciones | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| INTERES EN CAPACITARSE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ¿Principal motivación para capacitarse? (Puede seleccionar más de uno) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Encontrar trabajo | | | | | | | | | | | | | | | | | | | | | Formar o mejorar su negocio | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Continuar estudios superiores | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Independencia económica | | | | | | | | | | | | | | | | | | | | | | | | | |
| Como crecimiento personal | | | | | | | | | | | | | | | | | | | | | | | | | Conocer nuevas personas | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Ocupar el tiempo | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Formalizar mi negocio | | | | | | | | | | | | | | | | | | | | | | | | | |
| Otro: | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ¿Motivación para este curso? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Continuar estudios superiores | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Tiene altas posibilidades de empleo | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Es una temática de mi gusto | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Se relaciona con otros aprendizajes que tengo o con mi negocio | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | No había otra alternativa | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Observaciones | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Otros cursos realizados | | | | | | | | | | | | | | | | | | | Si, actualmente estudio para técnico superior en automatización y control. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| EXPERIENCIA LABORAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Trabaja actualmente | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | SI | | | | | | | | | | | | | | NO | | | | | | | | | | | | | | | | | | | | Nivel de renta mensual | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | $ 0000,000 | | | | | | | | | | | | | |
| Tiempo de experiencia laboral | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| No posee | | | | | | | | | | | Menos de 3 meses | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Más de 6 meses | | | | | | | | | | | | | | | | | | | | | | | | | | | | Más de un año | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Menos de 3 años | | | | | | | | | | | | | | | | | | | | | | | | 4 años y más | | | | | | | | | | | | |
| Fecha término último empleo (Mes/Año) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 12/2023. | | | | | | | | | | | | | | | | | | | | | | | | | Tipo de empleo | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Formal | | | | | | | | | | | | | | | | | | | Informal | | | | | | | | | | | | | Cuenta propia | | | | | | | | |
| Razones de término de su último trabajo | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Buscar otras alternativas laborales y comenzar mi propio negocio. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Últimos dos trabajos realizados | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Comerciante | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Formal | | | | | | | | | | | | | | | | | | Informal | | | | | | | | | | | | | | | | | | | | | | | | | | | | Voluntario | | | | | | | | | | | | | | | | | | | | | Independiente | | | | | | | | | | | | | | |
| Conductor de maquinaria pesada. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Formal | | | | | | | | | | | | | | | | | | Informal | | | | | | | | | | | | | | | | | | | | | | | | | | | | Voluntario | | | | | | | | | | | | | | | | | | | | | Independiente | | | | | | | | | | | | | | |
| Tiempo que lleva sin empleo | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Más de un mes | | | | | Menos de 3 meses | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Más de 6 meses | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Más de un año | | | | | | | | | | | | | | | | | | | | | | | | | | Menos de 3 años nunca he trabajado | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 4 años y más | | | | | | | | | | |
| Ámbito Laboral de Interés | | | | | | | | | | | | | | | | | | | | | | | DEPENDIENTE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | INDEPENDIENTE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cuáles son las principales dificultades para encontrar trabajo | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | No tengo la capacitación suficiente | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Tengo experiencia, mando currículo, pero no me llaman | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| He ido entrevista en grupo, pero no me han seleccionado | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Voy a entrevistas con la jefatura, pero no me han seleccionado | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | No logro pasar la entrevista psicológica | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DEPENDIENTE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Disponibilidad Jornada Laboral | | | | | | | | | | | | | | | | | | | | | | | | | | | Completa | | | | | | | | | | | | | | | | | | | | | Parcial | | | | | | | | | | | | | | | | | | | | Turnos | | | | | | | | | | | | | | | | | | | | Diurno | | | | | | | | | | | | | | | Vespertino | | | | | | | | | | | | | | | | | | | | | | | | Cualquiera | | | | | | | | |
| Expectativas de traslado | | | | | | | | | | | | | | | | | En su propia comuna | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | En la misma región | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Cualquiera Región del País | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Expectativas de sueldo líquido | | | | | | | | | | | | | | | | | | | | | | | | | | | | $300.000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | $300.000 a $500.000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | $501.000 a $700.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | Sobre $700.000 | | | | | | | | | | | | | | |
| Disponibilidad para horario de práctica laboral | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Completa | | | | | | | | | | | | | | | | | | | | | | | Media jornada mañana | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Media jornada tarde | | | | | | | | | | | | | | | | | | | | | | | | | No tiene | | | | |
| INDEPENDIENTE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. ¿Actualmente está generando algún tipo de ingreso para su hogar? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | SI | | | | | NO | | | | | | | | | | SI pasa a pregunta 2 NO a 3 | | | | | | | | | | | | | | | | | | | | | | | |
| 2. ¿Los ingresos que está generando son en forma Independiente? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | SI | | | | | NO | | | | | | | | | | ------------------------------------- | | | | | | | | | | | | | | | | | | | | | | | |
| 3. ¿El último año ha generado ingresos para su hogar? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | SI | | | | | NO | | | | | | | | | | SI pasa a pregunta 4 NO a 5 | | | | | | | | | | | | | | | | | | | | | | | |
| 4. ¿La actividad laboral realizada el último año fue como trabajador Independiente? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | SI | | | | | NO | | | | | | | | | | ------------------------------------- | | | | | | | | | | | | | | | | | | | | | | | |
| 5. ¿Cuándo termine curso, va a formalizar su negocio en SII y en la municipalidad? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | SI | | | | | NO | | | | | | | | | | ------------------------------------- | | | | | | | | | | | | | | | | | | | | | | | |
| VALORES DE LAS PREGUNTAS: SI a preguntas 1, 2, 3, y 4 = 1 punto c/u y NO = 0 punto. Valor a respuesta 5 = SI 3 puntos y NO = 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| De acuerdo al puntaje obtenido por postulantes se podrán conformar cursos más homogéneos y con inserción laboral formalizada | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| El participante ya cuenta con un emprendimiento | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | SI | | | | | | | | | | | NO | | | | | | | | | | | | |  | | | | | | | | | | | | No formal | | | | | | | | | | | | | | | | | | | Formal | | | | | | | | | | | | | | Tiempo | | | | | | | | | | | | | |  | |
| Cuánto tiempo dedicará a su emprendimiento | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Tiempo completo | | | | | | | | | Medio día | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Fines de semana | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Por Temporada | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Algunos días a la semana | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Dónde realizará su emprendimiento | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | En su casa | | | | | | | | | | | | | | | | | | | | | | | | | | En su taller | | | | | | | | | | | | | | | | | | | | | | Otro: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Apoyo y organización familiar para integrarse al mundo laboral | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Buena | Regular | | | | | | | | | | | | | | | | Mala | | | | | | | | | | | | | | | | Justifique | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Su IMM en los últimos 6 meses ha sido igual o menor a $320.500 brutos: \_\_\_\_\_\_\_\_, si es más ¿cuánto? $\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Observaciones | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| HÁBITOS LABORALES (respecto de su experiencia en trabajos anteriores, formales o informales) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Asistencia | | | | | | Buena | | | | | | | | | | | | | | | | | | | | Regular | | | | | | | | | | | | | | | | | | | Mala | | | | | | | | | | | | | | | Justifique | | | | | | | | | | | | | | | | | | | | | me apego a la responsabilidad | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Puntualidad | | | | | | Buena | | | | | | | | | | | | | | | | | | | | Regular | | | | | | | | | | | | | | | | | | | Mala | | | | | | | | | | | | | | | Justifique | | | | | | | | | | | | | | | | | | | | | Al compromiso | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Organización | | | | | | | Buena | | | | | | | | | | | | | | | | | | | Regular | | | | | | | | | | | | | | | | | | | Mala | | | | | | | | | | | | | | | Justifique | | | | | | | | | | | | | | | | | | | | | Al aprendizaje | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Relaciones laborales con jefaturas | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Buena | | | | | | | | | | | | | | | | Regular | | | | | | | | | | | | | | | | | | | | Mala | | | | | | | | | | | | | | | Justifique | | | | | | | | | | | | | | | | | | | | Respeto los contratos. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Relaciones laborales con compañeros | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Buena | | | | | | | | | | | | | | | | Regular | | | | | | | | | | | | | | | | | | | | Mala | | | | | | | | | | | | | | | Justifique | | | | | | | | | | | | | | | | | | | | Aporto aprendo y entrego. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Observaciones | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CONTINUACIÓNDE ESTUDIOS | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1.- ¿Presenta interés en realizar estudios superiores? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | SI | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | NO | | | | | | | | | | | | | | | | | | | |
| 2.- ¿Conoce las Instituciones de Educación Superior que se encuentran territorialmente cerca? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | SI | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | NO | | | | | | | | | | | | | | | | | | | |
| 3.- ¿Conoce los beneficios disponibles para estudiar en la educación superior? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | SI | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | NO | | | | | | | | | | | | | | | | | | | |
| 4.- ¿Piensa en trabajar y estudiar en forma paralela? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | SI | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | NO | | | | | | | | | | | | | | | | | | | |
| HÁBITOS DE ESTUDIO | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ¿Cuáles eran sus hábitos de estudios?  Orden y responsabilidad. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Identifique sus debilidades y fortalezas en materias de estudio:  Fortalezas , pragmático , perseverante, debilidades ansioso. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Señale sus principales desafíos para enfrentar la educación superior:  Mis principales desafíos son el tiempo y el espacio que debo complementar con mi día a día. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Observaciones | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| EVALUACIÓN Y CERTIFICACIÓN DE COMPETENCIAS LABORALES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ¿Conoce los beneficios de la Evaluación y Certificación de competencias? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | SI | | | | | | | | NO | | |
| ¿Estaría interesado/a en evaluar y certificar sus competencias? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | SI | | | | | | | | NO | | |
| Lugar de la entrevista: | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Fecha de la entrevista: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| Hora de inicio de la entrevista: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Hora de término de la entrevista: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| Firma del participante: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Se confirma por correo electrónico | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Firma del Tutor de Apoyo Sociolaboral: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Katherine Morán. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |