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| **Nombre Docente:** |  | **Semana de Entrega** | **De** | **Hasta** |
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| **Asignatura/ Curso:** |  | | | |

**DETALLE**

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| **Fecha** | **Hora** | | **Nombre Estudiante** | **Programa** | **Semestre** | | **Tema/Actividad/Orientación** | | **Firma Estudiante** |
| **Inicio** | **Fin** |
| aaaa/mm/dd |  |  |  |  |  | |  | |  |
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| **Firma Docente** | | | | | | **Facultad** | | **Fecha de recibo** | |
| aaaa/mm/dd | |

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| **CLASIF. DE CONFIDENCIALIDAD** | **IPR** | **CLASIF. DE INTEGRIDAD** | **A** | **CLASIF. DE DISPONIBILIDAD** | **1** |