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| Escuela Tecnológica Instituto Técnico Central | **FORMATO INTERRUPCIÓN VACACIONES POR NECESIDAD DEL SERVICIO** | **CÓDIGO: GTH-FO-26**  **VERSIÓN: 2**  **VIGENCIA: OCTUBRE 8 DE 2018**  **PÁGINA: 1 de 1** |

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| NOMBRE DEL FUNCIONARIO: | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| CÉDULA DE CIUDADANÍA: | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| DEPENDENCIA: | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| CARGO: | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| CÓDIGO: | | |  | | | | | | |  | | GRADO: | |  | | | | | | | | | | | | |
| RESOLUCIÓN VACACIONES No.: | | | | | | | | | | |  | | | | | | | |  | | | | | | | |
| De manera atenta le solicitamos interrumpir el disfrute de las vacaciones del Servidor (a) Publico (a) arriba identificado por estrictas necesidades del servicio, a partir del día: | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | mes | | |  | | año | | |  | | | y hasta el día | | | |  | | mes | | |  | | año | |  | |
|  | | | | | | | | | | | |  | | | | | | | | | | | | | | |
| El Servidor (a) Publico (a) reanudara el disfrute de sus vacaciones el día | | | | | | | | | | | | | | | | |  | | | mes | |  | | año | |  |
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| Firma Jefe inmediato | | | | | | | | | | | | |  | | Firma Funcionario | | | | | | | | | | | |
| **Observaciones:**   * Este formato debe ser diligenciado en su totalidad. * Las fechas establecidas no serán sometidas a cambios. | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| **CLASIF. DE CONFIDENCIALIDAD** | IPC | **CLASIF. DE INTEGRIDAD** | B | **CLASIF. DE DISPONIBILIDAD** | 3 |

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| Escuela Tecnológica Instituto Técnico Central | **FORMATO INTERRUPCIÓN VACACIONES POR NECESIDAD DEL SERVICIO** | **CÓDIGO: GTH-FO-26**  **VERSIÓN: 2**  **VIGENCIA: OCTUBRE 8 DE 2018**  **PÁGINA: 1 de 1** |

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| NOMBRE DEL FUNCIONARIO: | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| CÉDULA DE CIUDADANÍA: | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| DEPENDENCIA: | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| CARGO: | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| CÓDIGO: | | |  | | | | | | |  | | GRADO: | |  | | | | | | | | | | | | |
| RESOLUCIÓN VACACIONES No.: | | | | | | | | | | |  | | | | | | | |  | | | | | | | |
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| Firma Jefe inmediato | | | | | | | | | | | | |  | | Firma Funcionario | | | | | | | | | | | |
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