**NOMBRE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TELÉFONO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_No. DE CONTROL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CORREO ELECTRÓNICO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CARRERA**:IND. I.S.C I. I .A.A. L.A L.I **PERIODO: FEB–JULIO AGO – DIC**

**NOMBRE DE LA DEPENDENCIA O PROGRAMA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PLAN DE TRABAJO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**FECHA DE ASIGNACIÓN O INICIO:**

**FECHA DE ENTREGA DE REPORTES BIMESTRALES**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1ER. REPORTE** | **2DO. REPORTE** | **3ER. REPORTE** | **4TO. REPORTE** | **5TO. REPORTE** | **6TO. REPORTE** |
| PLAN | REAL | FIRMA | PLAN | REAL | FIRMA | PLAN | REAL | FIRMA | PLAN | REAL | FIRMA | PLAN | REAL | FIRMA | PLAN | REAL | FIRMA |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| **CURSO DE INDUCCIÓN** |  |
| **SOLICITUD** |  |
| **CARTA DE ASIGNACIÓN** |  |
| **SOLICITUD DE PRORROGA** |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **REPORTES BIMESTRALES** | **Hrs.** | **Hrs.** | **Hrs.** | **Hrs.** | **Hrs.** | **Hrs.** |
| **CARTA DE LIBERACIÓN** |  |
| **REPORTE FINAL** |  | **ACEPTADO:** |  |
| **CONSTANCIA DE LIBERACIÓN** |  |

**CONTROL DE EXPEDIENTES**

OBSERVACIONES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_