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**INSTITUTO TECNOLÓGICO SUPERIOR**

**DE SANTIAGO PAPASQUIARO**

**Departamento de Gestión Tecnológica y Vinculación**

**Reporte bimestral de Servicio Social**

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|  Reporte No.:\_\_\_\_\_ Nombre: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  Primer apellido  |  Segundo apellido  |  Nombre(s)  |

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Carrera:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No de Control \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Periodo Reportado:**

Del día\_\_\_\_\_ mes\_\_\_\_\_\_\_\_\_ año\_\_\_\_\_\_; al día\_\_\_\_\_ mes\_\_\_\_\_\_\_\_\_ año\_\_\_\_\_\_\_\_

Dependencia:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Programa: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Resumen de actividades:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Total de horas de este reporte;\_\_\_\_\_Total de horas acumuladas:\_\_\_\_\_\_\_** |  |  |

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| --- | --- | --- | --- | --- |
| Nombre, puesto y firma del supervisor | Sello |

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Firma del interesado  |
|  |

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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Vo. Bo. Oficina de Servicio Social  |

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| Revisión: | Fecha de emisión: | Código: | Documento: | Página: |
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