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| Fecha de solicitud: | Día | Mes | Año |

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| DEPENDENCIA |  |
| FUNCIONARIO |  |

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| ORIGEN |  |
| DESTINO |  |
| FECHA DE INICIO |  |
| FECHA DE TERMINACIÓN |  |

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| **ITINERARIO** | | |
| **DIA** | **HORA** | **ACTIVIDAD** |
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| OBSERVACIONES: |

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**Firma solicitante**

**La solicitud es aprobada:**

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| SI |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Rectoría |
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