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| Fecha: |  |

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| Reporte: |  | de: |  |

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| Nombre del prestador: | | | | |  | | | | | |
| Apellido Paterno Apellido Materno Nombre(s) | | | | | | | | | | |
| Matrícula: |  | | | | | Licenciatura: | | |  | |
| Nombre del proyecto: | | | |  | | | | | | |
| Periodo de realización de las estadías: | | | | | | | |  | | |
| Unidad receptora: | |  | | | | | | | | |
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| Temas a asesorar: | | |  | | | | | | | |

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| Solución recomendada: |  |

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| Nombre y firma  del Prestador. |  | Nombre y firma  del Monitor Académico. |  | Nombre, firma y sello  del Monitor Empresarial. |