

SERVICIO COMUNITARIO

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| **Nombre del Proyecto:**  |
| **Nombre:** | **C.I:** | **Telf.:** |
| **Carrera:** | **Correo:** |

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| **N** | **Fecha** | **Actividad** | **Nº de****Horas** | **Firma y sello** |
| **1** |  |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |
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| **22** |  |  |  |  |