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| **TITULO DEL CURSO/CHARLA** |  | | |
| **FECHA** |  | **DURACIÓN (HRS)** |  |
| **# SESIONES EN TOTAL** |  | **DURACIÓN TOTAL (HRS)** |  |
| **NOMBRE INSTRUCTOR**  **(Firmar abajo, asistencia)** |  | | |
| **PROVEEDOR** |  | | |

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| **NOMBRE DEL PARTICIPANTE** | **ESCUELA** | **CORREO ELECTRÓNICO** | **FIRMA** |
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