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| **FACULTAD** |  |
| **PERÍODO DE NOVEDAD** |  | **SEMESTRE ACADÉMICO** |  | **FECHA DE ENTREGA** |  |

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| **No.** | **NOMBRE** | **CÉDULA** | **FECHA DE INGRESO** | **VALOR HORA** | **NÚMERO DE HORAS SEMANALES** | **NÚMERO DE HORAS DICATADAS** | **OBSERVACION** |
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| **FIRMA DEL SUPERVISOR** |  | **FIRMA DEL VICERRECTOR ACADÉMICO** |

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| **RECIBIDO POR** |  | **FECHA** |  |