

**SOLICITUD PARA LA INCORPORACIÓN AL**

**RÉGIMEN VOLUNTARIO:**

**SEGURO DE SALUD PARA LOS ESTUDIANTES**

**SEGURO FACULTATIVO**

**DATOS DEL ESTUDIANTE**

NOMBRE:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  | APELLIDO PATERNO | | | | | MATERNO | | | | | | |  |  |  |  |  |  |  | NOMBRE (S) | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |
| MATRÍCULA: |  |  |  |  |  |  |  | CARRERA: | |  | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| GRUPO DE ORIGEN: | |  | | |  |  |  | CURP: |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| No. DE TELÉFONO: | | |  | |  |  |  | NÚMERO DE | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| CORREO ELECTRÓNICO: | | | |  |  |  |  | SEGURIDAD SOCIAL: | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| SEXO: | (MASCULINO) | | | | (FEMENINO) | | | FECHADENACIMIENTO: | | | | | | | ( | | | ) | | | | () ( | | | | | | |  | ) | | | |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | DD | | | |  |  | MM | | | | | | AAA | | | | | | | | | | |  |
| LUGAR DE NACIMIENTO: | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  | (MUNICIPIO Y ESTADO) | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| DOMICILIO: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  | CALLE | | | NÚMERO (Ext. o Int.) | | | | | | |  |  |  |  |  |  |  |  |  | COLONIA | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |
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| LOCALIDAD | | | | | MUNICIPIO | | |  | CÓDIGO POSTAL | | | | | |  |  |  |  |  |  |  |  |  | ENTIDAD FEDERATIVA | | | | | | | | | | | | | | | | |  |

BAJO PROTESTA DE DECIR VERDAD, DECLARO QUE LOS DATOS AQUÍ ASENTADOS SON CIERTOS.

FECHA DE SOLICITUD FIRMA DEL ESTUDIANTE

Anexar:  Constancia de vigencia de derechos

PARA SOLICITAR SU CONSTANCIA DE VIGENCIA DE DERECHOS POR INTERNET INGRESAR A LA PÁGINA:

[www.imss.gob.mx/imssdigital -](http://www.imss.gob.mx/)> Selecciona Consulta tu Vigencia de Derechos -> Ingresa tus datos (tener CURP, Número de Seguridad Social, y Correo electrónico a la mano).

Nota: Utilizar el Navegador Google Chrome.