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|  | Entrega - Recepción por cambio: | |  | | |  | | UVCG-VI-RH-06 | | | |
|  | Clave de Entidad Académica o Dependencia: | |  | |  | | | Hoja: |  | de |  |
|  | Entidad Académica o Dependencia: | |  | | |  | |  | | | |
|  | Región: | |  | | | |  | | | | |
|  | Fecha de corte de la información | |  |  | | | | | | | |
|  | | **RELACIÓN DE PRESTADORES DE SERVICIO SOCIAL** | | | | |  | | | | |

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| **Nº** | **Prestador del servicio social** | **Área de adscripción** | **Nombre del Programa de Servicio Social** | **Vigencia del Servicio Social** |
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**Lugar y fecha \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Ver., a \_\_\_\_\_\_ de \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ de 20\_\_\_\_\_\_\_\_**

|  |  |  |  |  |
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| Elaboró |  | Entrega |  | Recibe |
| Nombre y firma |  | Nombre y firma |  | Nombre y firma |