# DATOS DEL PROGRAMA A ESTUDIAR

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| NOMBRE DEL PROGRAMA: |  |  |
|  |  |  |

# DATOS GENERALES

NOMBRE (S) APELLIDO PATERNO APELLIDO MATERNO

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DIRECCIÓN CALLE NÚMERO COLONIA C.P CIUDAD Y ESTADO

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| FECHA DE NACIMIENTO\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  TELÉFONO\_\_\_\_\_\_\_\_\_\_\_\_\_ | DOMICILIO \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  OFICINA\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | CELULAR\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| CORREO ELECTRóNICO:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |

# ESTUDIOS PREVIOS (MARQUE CON UNA “X” UNo O VARIOS CAMPOS)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| * PASANTE
 | * LICENCIATURA
 | * MAESTRÍA
 | * DOCTORADO
 | * OTROS
 |
| ÁREAS DE ESTUDIO  |  |  |  |  |
| INSTITUCIÓN DE PROCEDENCIA  |  |  |  |  |
|  |  |  |  |  |

# ¿POR MEDIO DE CUáL MEDIO SE ENTERó DE ESTE EVENTO? (Marque con una “X” uno o varios campos)

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| web ampiecc | póster o flyer |  correo electrónico  |  | radio | recomendación |  otro |  especifique |

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