**ACTIVIDAD DESARROLLADA:**

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FECHA: \_\_\_\_\_\_\_\_\_ de \_\_\_\_\_\_\_\_\_\_\_ de \_\_\_\_\_\_

GRADO: \_\_\_\_\_\_\_\_ DIRECTOR DE GRUPO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OBJETIVO:

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| **N°** | **NOMBRE DEL ESTUDIANTE** | **NOMBRE Y APELLIDO PADRE DE FAMILIA O ACUDIENTE** | **TELEFONO** | **FIRMA** |
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**ANA MARIA MONTOYA ARBELAEZ**

Rectora.