##### CARTA DE ASIGNACIÓN

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Nombre: | | |  | | | | | | |  |  | | | | | | | | |  | |  | | | | |
|  | | | Apellido paterno | | | | | | |  | Apellido materno | | | | | | | | |  | | Nombre (s) | | | | |
| Edad: |  | | | | |  | | | Sexo: | | |  | M | ( ) | | F | | ( ) | | | | | | | |  |
| Dirección: | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| Colonia: | |  | | | | | | | | | | | | | | |  | | Ciudad y/o Estado: | | | | |  | | |
| Carrera o Especialidad: | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| Semestre: | | | |  | | |  | Número de control: | | | | | | |  | | | | | |  | | Créditos cursados: | | 70% | |

**Datos del programa**

|  |  |
| --- | --- |
| Nombre: |  |
| Objetivo: |  |

**Actividades a desarrollar**

|  |
| --- |
|  |
|  |
|  |

de requerir mayor espacio, integrar hojas anexas.

Tipo de actividades: ( X ) Administrativas ( ) Investigación ( ) Técnicas

( ) Docentes ( ) Asesoría ( ) Otras

Horario de actividades: a Días de trabajo: ( L ) ( M ) ( M ) ( J ) ( V )

Sello de la

Institución

Nombre y firma del prestador del servicio **N**ombre y firma del asesor del servicio