**Solicitud de Planificación Especial**

**Prácticas Externas**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Apellidos y Nombre: | | | | | | | |
| D. N. I.: | | | | Curso Académico: 201\_\_ / 202\_\_ | | | |
| e-mail: | | | | Teléfono: | | | |
| *PRACTICUM*: | **I** |  | **II** | |  | **III** |  |
| Periodo de Rotación: | | | | | | | |

***E X P O N E:***

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***S O L I C I T A (justificar documentalmente):***

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Mérida, \_\_\_ de \_\_\_\_\_\_\_\_\_\_\_\_\_\_ de 201\_\_*

*Fdo.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**Sr. Coordinador de la Comisión de Prácticas Externas**

**Centro/Facultad de \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**