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| Periodo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mes: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Programa Educativo: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cuatrimestre: \_\_\_\_\_\_\_ Grupo: \_\_\_\_\_\_\_ No. Total de Asistentes \_\_\_\_\_\_\_\_ Tema: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fecha \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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**OBSERVACIONES**

Grupales

Individuales

**CANALIZACIÓN**

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| --- | --- | --- | --- |
| Matricula  | Nombre | Nivel de atención | Definir |
| Médico  | Psicológico | Académica | Otro  |
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Nivel de atención: Alta, media, baja

Otro: área no indicada en las anteriores.