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| **Día** | **Mes** | **año** | **Hora** |
|  |  | 2021 | 10:30 |

**DATOS INSTITUCIÓN**

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| **Nombre de la institución** | **Tipo de financiamiento: P. Pagado, P. Subvencionado, Municipal, Otras instituciones** | **Dirección** | **Comuna** | **Región** |
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| **Teléfono (s) de la institución** | **Correo electrónico de la institución** |
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**DATOS GRUPO**

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| **Tema/objetivo/ exposición a visitar** | **Curso/ Nivel/ Especialidad** | **N° de integrantes** | **N° de adultos acompañantes** |
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**DATOS ENCARGADO DE GRUPO**

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| --- | --- | --- | --- |
| **Nombres** | **Apellidos** | **Fono fijo** | **Fono móvil** |
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| **Correo electrónico encargado de grupo** |
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| **DATOS INTEGRANTES DEL GRUPO** | | | | |
|  | NOMBRE | APELLIDOS | RUT | CORREO |
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