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| **Día** | **Mes** | **año** |  | **Martes a viernes** | | **Sólo martes y jueves** |
| **Hora** | **10:30** | **11:30** | **15:30** |
|  |  | 2022 | Marca “ x “ en la alternativa escogida |  |  |  |

**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 encargada/o de grupo** |
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| **DATOS INTEGRANTES DEL GRUPO (incluida/o encargada/o de grupo)** | | | | |
|  | NOMBRE | APELLIDOS | RUT | CORREO |
| 1 |  |  |  |  |
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