Con la firma de este formato el estudiante demuestra su asistencia al feedback y acepta la nota entregada por el docente en el bimestre mencionado.

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| **NOMBRE DEL FORMADOR:** |  | | |
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| **NIVEL:** |  | **GRUPO:** |  |
| **BIMESTRE:** |  | | |

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|  | **NOMBRE ESTUDIANTE** | **NOTA** | | | **FIRMA ESTUDIANTE O ACUDIENTE** |
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