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| **CONTROL DE ASISTENCIA** | | | | | | | | | | | |
| **Facultad** | |  | | | | **Proyecto Curricular** | |  | | | |
| **Espacio Académico** | |  | | | | **Grupo** | |  | | | |
| **Docente** | |  | | | | **Código** | |  | | | |
| **Mes** | |  | | | | **Periodo Académico** | |  | | | |
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| **N°** | **Nombre del Estudiante** | | **Código** | **Fecha de la Clase** | | | | | | | |
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| **Firma** | **Firma** | | **Firma** | | **Firma** | **Firma** | **Firma** |
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