**Presentación para inscripción de candidatos a:**

**Miembros del Consejo de la Facultad**

Pegar Fotos 4 cm. X 4 cm.

**Estamento : ESTUDIANTIL.**

**Miembro : \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_**

**Firma : \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_**

**C.I.N° : \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_**

Fecha: Día\_\_\_\_\_/Mes\_\_\_\_\_\_\_\_\_/Año\_\_\_\_\_\_\_

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| **INFORMACIÓN DEL CANDIDATO/A (MIEMBRO TITULAR)** | | | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | |
| Nombre(s) |  | | Apellido(s) |
| Teléfono: | | Correo Electrónico: | |

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| **INFORMACIÓN DEL CANDIDATO/A (MIEMBRO SUPLENTE)** | | | |
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|  | |
| Nombre(s) |  | | Apellido(s) |
| Teléfono: | | Correo Electrónico: | |

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| **Presentación de Apoderados** | | | | | |
| **N°** | **Nombres y Apellidos** | **C.I. N°** | **Teléfono** | **Correo Electrónico** | **Firma** |
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