LISTA DE ASISTENCIA

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| **PERIODO ESCOLAR** | | |  | **CICLO DE ESTUDIOS** | | | |  | **DEPARTAMENTO ACADÉMICO** | | | | | | | | |
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| **MATERIA** | | | | | | | | | | | |  | | **CLAVE** | | **GRUPO** | |
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| **CATEDRÁTICO** | | | | | | | | | | | | | | | |  | |
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| **ALUMNO** | | **LUNES** | | | **MARTES** | | **MIÉRCOLES** | | | | **JUEVES** | | | **VIERNES** | **SÁBADO** | | |
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| **No** | **R** | **NOMBRE DEL ALUMNO** | | | | | | | | | **No. DE CONTROL** | | | | | | |
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| R Alumno Repetidor | | | |  | |  | |  |  |  |  |  | |  | | |  |
| CE Alumno en Curso Especial | | | |  | |  | |  |  |  |  |  | |  | | |  |
| \*\*\* Alumno en Curso Global | | | |  | |  | |  |  |  |  |  | |  | | |  |
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| FECHA: | | | | | |  | |  |  |  |  |  | |  | | |  |