**BITÁCORA DE ASISTENCIA**

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| Nombre completo\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Semestre\_\_\_\_\_\_  Periodo\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Horario\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Instancia donde realiza el Servicio Social\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
|  | **Día, Mes y Año** | | **Número de horas** | **Firma del estudiante** | **Firma y sello del responsable del escenario** |
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| **TOTAL DE HORAS:** | | | | |  |
| Actividades/  Evidencias/  Incidencias: | |  | | | |

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