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| |  |  |  |  | | --- | --- | --- | --- | |  | **GESTIÓN DOCUMENTAL** | **Código** | **FO-GD-22/v1** | | **FORMATO SOLICITUD DE DOCUMENTOS EXTERNOS** | **Página** | **1/1** |   **FECHA:**  **NOMBRE SOLICITANTE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Código\_\_\_\_\_\_\_\_\_\_**  **SOLICITUD N°\_\_\_\_\_\_\_\_\_\_\_\_\_\_**   |  |  | | --- | --- | | 1. ***Constancia de:***   **\*Aprobación de la Universidad □**  **\* Egresado □**  **\* Aprobación de carrera □**  **\* Beca Trabajo y monitoria □**  **\* Representación ante los distintos órganos □**  **\* Título en trámite □** | ***2. Carta para el Consulado □***  ***3. Copia Acta de Grado □***  ***4. Duplicado del diploma □***  ***5. Registro de Diploma □*** |   **Otro documento: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Recibí: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **………………………………………………………………………………………………………………………..**     |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Fecha de solicitud:** | **DIA** |  | **MES** |  | **AÑO** |  | **Fecha de entrega:** | **DIA** |  | **MES** |  | **AÑO** |  |   **Nombre del solicitante: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Solicitud N°\_\_\_\_\_\_\_\_\_\_\_\_**  **Solicitud: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Firma solicitante Firma Funcionario quien recibe** |