**CRONOGRAMA DE TRABAJO PARA LA**

**ACTUALIZACIÓN DE CONOCIMIENTOS**

**PERÍODO ACADÉMICO:**

**FACULTAD:**

**CARRERA:**

**METAS :**

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| **N°** | **ACTIVIDAD** | **FECHAS PROGRAMADAS** | | | | | | | | | | | | **RECURSOS** | **RESPONSABLES** | **OBSERVACIONES** |
| **MES 1** | | | | **MES 2** | | | | **MES N…** | | | |
| **S 1** | **S 2** | **S 3** | **S 4** | **S 1** | **S 2** | **S 3** | **S 4** | **S 1** | **S 2** | **S 3** | **S 4** |
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Mgs. Nombre y Apellido

**Responsable de la Unidad de Titulación Especial**