**No DE RECIBO R**\_**INC:** \_\_\_\_\_\_\_\_\_\_

UNIVERSIDAD ESPECIALIZADA DE LAS AMÉRICAS

SECRETARIA GENERAL

SOLICITUD DE RETIRO E INCLUSIÓN DE ASIGNATURAS

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | SEMESTRE | 21 |  | No. DE RECIBO DE MATRÍCULA: |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| NOMBRE DEL ESTUDIANTE: |  | CÉDULA: |  | TELÉFONO: |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| FACULTAD: |  |  | CARRERA: |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| AÑO DE LA CARRERA: |  |  | SEMESTRE DE LA CARRERA: |  |  |

|  |  |  |
| --- | --- | --- |
| **MATERIAS MATRICULADAS** | **MATERIAS RETIRADAS** | **MATERIAS INCLUIDAS** |
| NOM ASIG | COD ASIG | COD HOR | GRUPO | NOM ASIG | COD ASIG | COD HOR | GRUPO | NOM ASIG | COD ASIG | COD HOR | GRUPO |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

MOTIVO DE LA SOLICITUD:

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FIRMA DEL ESTUDIANTE:** |  | **FECHA:** |  | **V°B° DE LA ESCUELA:** |  |

*NOTA: ADJUNTAR COPIA DEL RECIBO DE MATRÍCULA.*