Universidad Especializada de las Américas

**Secretaría General**

Examen de Rehabilitación

**Importante:** **La información solicitada en este formulario la puede encontrar en su libreta virtual.**

**Nombre del Docente**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Firma del Docente**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Fecha de entrega**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Materia: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Carrera: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cód. de Mat.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grupo: \_\_\_\_\_\_\_\_\_\_\_\_\_ Semestre: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Año: \_\_\_\_\_\_\_\_\_\_.

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| **Nombre del Estudiante** | **Cédula** | **Nota del Semestral** | | **Nota examen de rehabilitación** | **Nota final**  **(Letras y Puntos)** |
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