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| Nombres y Apellidos: |  | | Cédula: |  |
| Cargo: |  | Dependencia: |  | |

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| **LICENCIA REMUNERADA** | | | |  |
| Días: |  | Desde: | Hasta: | Regresa: | |

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| **LICENCIA NO REMUNERADA** | | | |  |
| Días: |  | Desde: | Hasta: | Regresa: | |

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| **VACACIONES** | | |  | |
| DÍAS: |  | EN TIEMPO: | | DINERO: |
| DESDE: | | | HASTA: | REGRESA: |
| PERIODO VACACIONAL | | |  | |
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| **OBSERVACIONES** |  |
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**RECTORA FIRMA DEL TRABAJADOR**