|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Periodo | **ENE-JUN** |  | **AÑO** |  |  | **AGO-DIC** |  | **AÑO** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Nombre:** |  |  | **Carrera:** |  |
| **Correo Electrónico:** |  |  | **No. de Control:** |  |

|  |  |
| --- | --- |
| **Dependencia:** |  |
| **Programa:** |  |
| **Objetivo del Programa:** | Elija un elemento. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Fecha inicio:** |  | **Fecha de termino:** |  | **Horario:** |  |

**Detalle de actividades**

|  |  |
| --- | --- |
| **No.** | **Descripción** |
| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |

**Cronograma de realización de actividades**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Act** | **Semanas** | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 |
| 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Nombre, cargo, firma y sello**  **Titular de la dependencia** | **Nombre, cargo y firma**  **Responsable del programa** | Sello del  Departamento de Gestión Tecnológica y Vinculación |

Nota: Si requiere de más tiempo, anexar documento con cronograma