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| M.Sc. Rodrigo Estuardo Herrera Galindo | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Director General | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Dirección General de Educación Física | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Presente | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Estimado Director General: | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Cordialmente presentamos la solicitud de nuestro establecimiento educativo: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |
| Nombre: | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ubicado en: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Municipio: | | | | |  | | | | | | | | | | | | | | | | | | | |  | Departamento: | | | | | | | |  | | | | | | | | | | | | | | | |
| Códigos de establecimiento que funcionan dentro del complejo educativo: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| para el proyecto de infraestructura deportiva escolar descrito a continuación: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |
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| Para comunicación se dispone del número de teléfono | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| o en el correo electrónico: | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Población Escolar | | | | | | | | | | | | | | | |  | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Agradecemos la respuesta | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  | Director(a) del Establecimiento | | | | | | | | | | | | | | | | | | | | | |  |  | Autoridad de Distrito Educativo - Orientador Metodológico Departamental | | | | | | | | | | | | | | | | | | | | | |  |  |
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| EXCLUSIVO PERSONAL DE DIGEF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Fecha de ingreso: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | Cumple con listado de requisitos: | | | | | | | | | | | | | | | | |  | Si | |  | | | |  |  | No | |  | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | Revisado por: | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Autorizado por: | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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