



UNIVERSIDAD AUTÓNOMA DE BAJA CALIFORNIA
FACULTAD DE CIENCIAS ADMINISTRATIVAS
Sistematización proceso de acreditación



Relación de Alumnos Participantes en Curso

Carrera: _____

Nombre del Curso: _____

Nombre del Instructor: _____

Empresa o Institución: _____

Fecha: _____

| No | Nombre del Alumno | Matricula | Grupo | Firma |
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DIRECTOR

COORD. PROG. ACADÉMICO