

**DIRECCION PARA EL DESARROLLO INTEGRAL DEL ADULTO MAYOR**

**UNIVERSIDAD ABIERTA NO FORMAL PARA ADULTOS MAYORES UNI3**

**INFORME MENSUAL DE ACTIVIDADES\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MES\_\_\_\_\_\_\_\_\_ 2016**

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| **FECHA** | **NOMBRE DEL GRUPO** | **TEMA** | **SESIONES** | **H** | **M** | **ASESORIAS** | **OBSERVACIONES** |
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 **Vo. Bo. DEL COORDINADOR NOMBRE Y FIRMA DEL PROFESOR**