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| **FORMATO DE APOYO Y SEGUIMIENTO DE LA TRAYECTORIA ACADÉMICA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **PROGRAMA INSTITUCIONAL DE TUTORIA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **INSTITUTO TECNOLOGICO DE:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **CARRERA:** | | | | **ASIGNATURA 1** | | | | | | | | | | | | | | | **ASIGNATURA 2** | | | | | | | | | | | | | | | | **ASIGNATURA 3** | | | | | | | | | | | | | | | **ASIGNATURA 4** | | | | | | | | | | | | | | | | **ASIGNATURA 5** | | | | | | | | | | | | | | **ASIGNATURA 6** | | | | | | | | | | | | |
| **Semestre:** | | | |
| **Evaluación parcial:**  **(Nivel de desempeño)** | | | | | | 1. COMPETENCIA NO ALCANZADA | | 2. INASISTENCIAS | | 3. INDISCIPLINA | | 4. NO ENTREGA TRAB/PRACT | | 5. APOYO PSICOLOGICO | | 6. APOYO ECONOMICO (BECA) | | 7. OTRO | | | 1. COMPETENCIA NO ALCANZADA | | 2. INASISTENCIAS | | 3. INDISCIPLINA | | 4. NO ENTREGA TRAB/PRACT | | 5. APOYO PSICOLOGICO | | 6. APOYO ECONOMICO (BECA) | | 7. OTRO | | | 1. COMPETENCIA NO ALCANZADA | | 2. INASISTENCIAS | | 3. INDISCIPLINA | | 4. NO ENTREGA TRAB/PRACT | | 5. APOYO PSICOLOGICO | | 6. APOYO ECONOMICO (BECA) | | 7. OTRO | | | 1. COMPETENCIA NO ALCANZADA | | 2. INASISTENCIAS | | 3. INDISCIPLINA | | 4. NO ENTREGA TRAB/PRACT | | 5. APOYO PSICOLOGICO | | 6. APOYO ECONOMICO (BECA) | | 7. OTRO | | 1. COMPETENCIA NO ALCANZADA | | | 2. INASISTENCIAS | | 3. INDISCIPLINA | | 4. NO ENTREGA TRAB/PRACT | | 5. APOYO PSICOLOGICO | 6. APOYO ECONOMICO (BECA) | | 7. OTRO | | 1. COMPETENCIA NO ALCANZADA | | | 2. INASISTENCIAS | | 3. INDISCIPLINA | | 4. NO ENTREGA TRAB/PRACT | | 5. APOYO PSICOLOGICO | | 6. APOYO ECONOMICO (BECA) | | 7. OTRO |
| **Mes:** | | | | | |
| **Tutor:** | | | | | |
| **Grupo: Aula:** | | | | | |
| **No de Control** | | | **Nombre del estudiante** | | |
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| 8 |  |  | | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | | |  | |  | | |  | |  | |  | |  | |  |  |  | |
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| 10 |  |  | | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | | |  | |  | | |  | |  | |  | |  | |  |  |  | |
| 11 |  |  | | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | | |  | |  | | |  | |  | |  | |  | |  |  |  | |
| 12 |  |  | | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | | |  | |  | | |  | |  | |  | |  | |  |  |  | |
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| 14 |  |  | | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | | |  | |  | | |  | |  | |  | |  | |  |  |  | |
| 15 |  |  | | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | | |  | |  | | |  | |  | |  | |  | |  |  |  | |
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| **OBSERVACIONES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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**INSTRUCCIONES DE LLENADO**

1. Marque con una “X” en el espacio correspondiente a la incidencia del alumno en cada asignatura

de acuerdo a la información recabada y anote en observaciones la descripción de la sesión.

1. Escriba a continuación el número de sesiones individuales o grupales de Tutoría. Sesiones Individuales ( ) Sesiones grupales ( )

**NOTAS**

♦Este reporte deberá ser llenado por el tutor

♦Deberá ser entregada al Coordinador de Tutoría por Departamento Académico con copia para el tutor.

♦Anotar cada evento que dificulte el alcance de la competencia y que estrategia se utilizó para lograrlo.

Fecha: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Firma del tutor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Coordinador de Tutoría por Departamento Académico\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_