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| **UNIVERSIDAD AUTÓNOMA DE SINALOA**  **Dirección General de Vinculación y Relaciones Internacionales**  **Facultad de Contaduría y Administración** |



**CRONOGRAMA DE ACTIVIDADES – PROGRAMA DE PRÁCTICAS PROFESIONALES**

*Para ser elaborado por el Responsable en la Unidad Receptora y/o el Practicante Profesional*

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|  | **Fecha:** |  |
| **Unidad Receptora:** |  | |
| **Nombre del Proyecto:** |  | |
| **Responsable:** |  | |
| **Periodo de Realización:** |  | |

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| **Periodo**  **Actividades** | Primer Mes | | | | Segundo Mes | | | | Tercer Mes | | | | | | Cuarto Mes | | | | | | Quinto Mes | | | | Sexto Mes | | | |
| Semana | | | | Semana | | | | Semana | | | | | | Semana | | | | | | Semana | | | | Semana | | | |
| 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | | 4 | | 1 | 2 | | | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| 1. | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | | **☐** | | **☐** | **☐** | | **☐** | **☐** | | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** |
| 2. | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | | **☐** | | **☐** | **☐** | | **☐** | **☐** | | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** |
| 3. | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | | **☐** | | **☐** | **☐** | | **☐** | **☐** | | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** |
| 4. | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | | **☐** | | **☐** | **☐** | | **☐** | **☐** | | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** | **☐** |

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| Responsable  Unidad Académica |  | Practicante |  | Responsable  Unidad Receptora |
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