



Curso/Grupo \_\_\_\_\_

Duración \_\_\_\_\_

Lugar \_\_\_\_\_

Objetivo \_\_\_\_\_

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### Equipo Docente

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### Programa

**Hora**                      **Actividad**

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### A recordar

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### Materiales necesarios

\_\_\_\_\_ **Cantidad** \_\_\_\_\_

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\_\_\_\_\_ **Cantidad** \_\_\_\_\_

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Presupuesto disponible \_\_\_\_\_ Total \_\_\_\_\_



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