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| **AÑO** | **2020** |  | **CÓDIGO DE MATRICULA** |  |

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| **NOMBRE DEL INSTITUTO** | | **IESTP ”CAYETANO HEREDIA SRL”** | | | | **PLAN DE ESTUDIO** | | **ENFERMERÍA - 2020** |
| **TIPO DE GESTIÓN** | | **PRIVADA** | | | | **GRE** | | **AREQUIPA** |
| **RESOLUCIÓN DE LICENCIAMIENTO Y/O AUTORIZACIÓN (TIPO, NÚMERO Y FECHA)** | | | **R.M. N° 1006-80-ED – R.D. N° 49 -0 –ED - R.M.N°023-2010-ED** | | | | | |
| **LUGAR DONDE SE PRESTA EL SERVICIO EDUCATIVO** | | | | | | | | |
| **DEPARTAMENTO** | **AREQUIPA** | | | | **GRE** | | **AREQUIPA** | |
| **PROVINCIA** | **AREQUIPA** | | | | **DISTRITO** | | **AREQUIPA** | |
| **CENTRO POBLADO** | **---------** | | | | **TELÉFONO** | | **054-212016** | |
| **DIRECCIÓN** | **CALLE VICTOR LIRA 407** | | | | | | | |
| **CORREO ELECTRÓNICO** | | | | **PÁGINA WEB** | | | | |
| **informes@icayetanoheredia.edu.pe** | | | | **WWW.icayetanoheredia.edu.pe** | | | | |

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| **DATOS DEL ESTUDIANTE** | | | | | | | | | | | | | | | | |
| **APELLIDO PATERNO** | | | **APELLIDO MATERNO** | | | **NOMBRES** | | | | | | | **SEXO** | | | |
|  | | |  | | |  | | | | | | | **F** |  | **M** |  |
| **FECHA DE NACIMIENTO** | | | **DOCUMENTO DE IDENTIDAD**  **(DNI, CE, OTROS)** | | | | | | **EDAD** | | **PAÍS** | | | | | |
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| **LUGAR DE NACIMIENTO** | | | **DISTRITO** | | | **PROVINCIA** | | | | | | **REGIÓN** | | | | |
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| **DOMICILIO** | | | | **TRABAJA** | | | | | | **PUESTO** | | | | | | |
|  | | | | **SÍ** |  | | **NO** |  | |  | | | | | | |
| **ESTADO CIVIL** | | | **TELÉFONO** | | | **CORREO ELECTRÓNICO** | | | | | | | | | | |
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| **RESUMEN ACADEMICO** | | | | | | |
| **PROGRAMA DE ESTUDIOS O CARRERA** | | **PROGRAMA DE ESTUDIOS** | | **NIVEL FORMATIVO** | | **PROFESIONAL TÉCNICO** |
| **UNIDADES DIDÁCTICAS** | **RECUPERACIÓN** | **DURACIÓN** | | **FECHA** | | **OBSERVACIONES** |
| **CREDITOS** | **HORAS** | **INICIO** | **TÉRMINO** |
| **Anatomía Funcional** |  | **4** | **80** |  |  |  |
| **0Actividades en Epidemiología0** |  | **4** | **96** |  |  |  |
| **0Actividades en Salud Comunitaria** |  | **5** | **96** |  |  |  |
| **Educación para la Salud** |  | **4** | **80** |  |  |  |
| **Comunicación Efectiva** |  | **3** | **64** |  |  |  |
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Arequipa, 09 de Noviembre del 2020

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| Jefe de Unidad Académica  Sello, firma, postfirma |  |  | Secretaría Académica  Sello, firma, postfirma |