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| **ASIGNATURA / PROYECTO** |  | | | | | |
| **DOCENTE / TUTOR** |  | | | | | |
| **ESTUDIANTE(S)** |  | | | | | |
| **No. TOTAL DE ASISTENTES** |  | | | | | |
| **FECHA REQUERIDA** | (dd/mm/aaaa) al (dd/mm/aaaa) | | | | | |
| **HORARIO** | **Día** | **Lunes** | **Martes** | **Miércoles** | **Jueves** | **Viernes** |
| Entrada | (00h00) | (00h00) | (00h00) | (00h00) | (00h00) |
| Salida | (00h00) | (00h00) | (00h00) | (00h00) | (00h00) |

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| **REACTIVOS** | | | |
| **NOMBRE** | **CANTIDAD** | **CÓDIGO** | **UBICACIÓN** |
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| **MATERIALES / INSUMOS** | | | |
| **NOMBRE** | **CANTIDAD** | **NOMBRE** | **CANTIDAD** |
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| **EQUIPOS** | | |
| **NOMBRE** | **CANTIDAD** | **OBSERVACIÓN** |
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| **OTROS REQUERIMIENTOS:** |

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| **APROBACIÓN *(campo exclusivos para personal de la UITEY)*** | |
| **LABORATORISTA** |  |
| **JEFE** |  |