REGISTRO DE EVIDENCIAS DE LOS ESTUDIANTES

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| Institución Educativa | | | | Docente | | | Mes | | | Grado y Sección | | | Ciclo | | | Mes | | |
| “…” | | | |  | | |  | | |  | | |  | | |  | | |
| Nº | APELLIDO PATERNO | APELLIDO MATERNO | NOMBRES | **MES DE AGOSTO** | | | | | | | | | | | | | | |
| Tema: | | | Tema: | | | Tema: | | | Tema: | | | Tema: | | |
| **SEMANA 1** | | | **SEMANA 2** | | | **SEMANA 3** | | | **SEMANA 4** | | | **SEMANA 5** | | |
| **Fecha:** | | | **Fecha:** | | | **Fecha:** | | | **Fecha:** | | | **Fecha:** | | |
| Participación | | Tipo de Evidencia | Participación | | Tipo de Evidencia | Participación | | Tipo de Evidencia | Participación | | Tipo de Evidencia | Participación | | Tipo de Evidencia |
| **SI** | **NO** | **Foto, Video, Otros** | **SI** | **NO** | **Foto, Video, Otros** | **SI** | **NO** | **Foto, Video, Otros** | **SI** | **NO** | **Foto, Video, Otros** | **SI** | **NO** | **Foto, Video, Otros** |
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