|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Fecha** | **DÍA** | **MES** | **AÑO** |  | **No. de Consecutivo** |
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| 1. INFORMACIÓN PERSONAL | | | | | | | | | | |
| Nombres y Apellidos completos |  |  |  |  |  |  |  |  |  |  |
|  | TI. |  | C.C. |  | No: |  |  |  | Código: |  |
| Dirección de Residencia |  |  |  |  |  |  |  |  |  |  |
| Teléfono No. |  |  |  |  |  | Correo: |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| ¿Ha cancelado semestre? | SI |  | NO |  |  | Cuál(es) |  |  | Cuándo |  |
| Ha sido beneficiario de crédito estudiantil | SI |  | NO |  |  | Cuantos semestres | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| Tiene deuda actual | SI |  | NO |  |  | Valor de la deuda $ | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| Ha recibido beneficios de Bienestar Universitario | SI |  | NO |  | Cuando | | Cuales |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| 2.        INFORMACIÓN ACADÉMICA | | | | | | | | | | |
| Facultad |  |  |  |  |  |  |  |  |  |  |
| Programa |  |  |  |  |  |  |  |  |  |  |
| Semestre |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| 3.        MOTIVOS DE CANCELACIÓN | | | | | | | | | | |
| Motivos Familiares o Personales: |  |  |  |  |  |  |  |  |  |  |
| Motivos Académicos: |  |  |  |  |  |  |  |  |  |  |
| Motivos Económicos: |  |  |  |  |  |  |  |  |  |  |
| Motivos Salud: |  |  |  |  |  |  |  |  |  |  |
| Otros: |  |  |  |  |  |  |  |  |  |  |

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Firma estudiante y documento

**PAZ Y SALVOS**

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| --- | --- | --- | --- | --- |
| **Apoyo Financiero** |  | **Decanatura** |  | **Humanidades** |
|  |  |  |  |  |
| **Biblioteca** |  | **Bienestar Universitario** |  |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Fecha de estudio de solicitud** | | | **Aceptado** | |  | **Si fue aceptado se le reserva el cupo** | | |
| **Día** | **Mes** | **Año** | **Sí** | **No** | **1 Sem.** | | **1 Año** | **3 Años** |
|  |  |  |  |  |  | |  |  |

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Firma Admisiones y Registro