**INFORME BIMESTRAL DE SERVICIO SOCIAL**

INFORME DEL ***N° (1,2,..)*** BIMESTRE

ENTREGAR LA ÚLTIMA SEMANA DE CADA BIMESTRE

|  |  |  |  |
| --- | --- | --- | --- |
| Nombre del prestador/a: |  | | |
| No. De Cuenta: |  | Carrera: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Nombre del Programa: |  | Clave del Programa: |  |
| Institución: |  | Responsable: |  |
| Fecha de inicio de SS: |  | Horario de actividades: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Semana 1** | | **Semana 2** | | **Semana 3** | | **Semana 4** | |
| **Día** | **Entrada** | **Salida** | **Entrada** | **Salida** | **Entrada** | **Salida** | **Entrada** | **Salida** |
| Lunes |  |  |  |  |  |  |  |  |
| Martes |  |  |  |  |  |  |  |  |
| Miércoles |  |  |  |  |  |  |  |  |
| Jueves |  |  |  |  |  |  |  |  |
| Viernes |  |  |  |  |  |  |  |  |
| Sábado |  |  |  |  |  |  |  |  |
| Domingo |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Semana 5** | | **Semana 6** | | **Semana 7** | | **Semana 8** | |
| **Día** | **Entrada** | **Salida** | **Entrada** | **Salida** | **Entrada** | **Salida** | **Entrada** | **Salida** |
| Lunes |  |  |  |  |  |  |  |  |
| Martes |  |  |  |  |  |  |  |  |
| Miércoles |  |  |  |  |  |  |  |  |
| Jueves |  |  |  |  |  |  |  |  |
| Viernes |  |  |  |  |  |  |  |  |
| Sábado |  |  |  |  |  |  |  |  |
| Domingo |  |  |  |  |  |  |  |  |

Horas acumuladas del bimestre: \_\_\_\_\_\_\_\_

Horas acumuladas hasta la fecha: \_\_\_\_\_\_\_\_

**Actividades realizadas:**

1. ……..
2. ……..
3. ……
4. ……..
5. ……

|  |
| --- |
|  |
| **Prestador de Servicio Social (Alumno/a)**  Nombre y firma |

|  |
| --- |
| **Vo.Bo.** |
| **Grado y nombre Asesor/a**  Cargo y nombre de la Institución receptora |