CODIGO CURSO\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOMBRE DEL CURSO\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OTIC\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# PROGRAMA DE BECAS LABORALES 2020

# VISITA DEL ORGANISMO CAPACITADOR A LA EMPRESA

IDENTIFICACION DE LA EMPRESA, OTEC, CURSO Y Nº DE ALUMNOS

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Empresa | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | RUT | |  |  |  |  |  |  |  |  |  | |  | |
| Fono |  | |  | | |  | |  | |  | |  | |  | |  |  |  | Dirección | | | |  | | | | | | | | | | | | | | | | | | | | |
| Comuna | | |  | | | | | | | | | | | | | | | | | | Nombre encargado | | | | |  | | | | | | | | | | | | | | | | |
| OTEC | | | | | | | | | | | | | | | | | | | | | | | | | | | | Fono | | |  |  |  |  |  |  |  |  |  |  | |
| Programa:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | | | | Curso:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | | | | |
| Nº de alumnos en la empresa: | | | | | | | | | | | | | | | | | |  |  |  | | | | | | | | | | | | | | | | | | | | | | |
| Fecha: | |  | |  | | |  | |  | |  | |  | | Hora visita de: | | | | | | |  | : |  | a: |  | : | |  |  | | | | | | | | | | | | |

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| OBJETIVOS DE LA VISITA: | | | | | | | | | | | |
| Informar |  |  | Verificar |  |  | Resolver |  |  | Observar desempeño alumnos |  |
| Aplicar instrumento |  | Entrevistarse con |  |  | Reunirse con |  |  | Entregar beneficios |  |
|  | | | | | | | | | | | |
| Acticvidad:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |

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| NOMBRE Y CEDULAS DE IDENTIDAD DE LOS ALUMNOS: | | | | | | | | | | | | | |  | P | A | R | | D | | C | |
| 1 |  |  | CI: |  |  |  |  |  |  |  |  | - |  |  |  |  |  |  | |  | |
| 2 |  |  | CI: |  |  |  |  |  |  |  |  | - |  |  |  |  |  |  | |  | |
| 3 |  |  | CI: |  |  |  |  |  |  |  |  | - |  |  |  |  |  |  | |  | |
| 4 |  |  | CI: |  |  |  |  |  |  |  |  | - |  |  |  |  |  |  | |  | |
| 5 |  |  | CI: |  |  |  |  |  |  |  |  | - |  |  |  |  |  |  | |  | |

P : Presente A : Ausente R : Retirado D : Desertor C : Contratado

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| TAREAS A DESARROLLAR POR LOS ALUMNOS EN LA EMPRESA |  |
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| RELACIÓN DE LO ACONTECIDO U OBSEVADO EN TERRENO |  |
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| ACUERDO O COMPROMISOS CON LA EMPRESA |  |
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| Nombre Encargado de la Empresa |  | Nombre Supervisor OTEC |
| Firma |  | Firma |