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| **SOLICITUD** | |  | | --- | | Ficha No: |  Lugar: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Fecha: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **CONVOCATORIA ESTÍMULO ECONÓMICO PARA EL DESARROLLO Y EJECUCIÓN DE PROYECTOS COMUNITARIOS 2019** |

## DATOS GENERALES DEL SOLICITANTE

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| **NOMBRE:** | |  | | | | |  | | |  | | | |  | | | | |  |
|  | | **APELLIDO(S)** | | | | | **PATERNO** | | | **MATERNO** | | | | **NOMBRE(S)** | | | | |  |
| **LUGAR DE NACIMIENTO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **FECHA DE NACIMIENTO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EDAD\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **PLANTEL DE LA UNAM\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CARRERA:\_\_\_\_\_\_\_\_\_\_ SEMESTRE\_\_\_\_\_\_\_\_\_\_\_**  **PROMEDIO:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AÑOS EN EL SBEI: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **No. DE CUENTA \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **RFC:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CURP:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | | | | | | | | | | |  |
| **SEXO:** | | **MASCULINO** | | | | |  |  | | | **FEMENINO** | | | | |  |  | | |
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| **ESTADO CIVIL:** | | | | **CASADO (A)** |  | **SOLTERO (A)** | | |  | | |  | **OTRO \_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | |
| **DOMICILIO ACTUAL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | | | | | | | | | | | |
|  | | | **CALLE Y NÚMERO, INTERIOR** | | | | | | | | | | | | | | |  | |
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| **COLONIA:** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | **CIUDAD: \_\_\_\_** | | | | |  | | | | |
| **ALCALDÍA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CP:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **TELÉFONO DE DOMICILIO\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **TELÉFONO CELULAR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **TELÉFONO DE ALGÚN FAMILIAR (INDICAR QUÉ FAMILIAR): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **CORREO ELECTRÓNICO:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | | | | | | | | | | | |

## 2. ADSCRIPCIÓN ÉTNICA

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| **¿A QUÉ ETNIA O PUEBLO ORIGINARIO PERTENECE?:** |
| **UBICACIÓN DE LA COMUNIDAD O LOCALIDAD DE ORIGEN**  **NOMBRE DE LA COMUNIDAD:**  **MUNICIPIO:**  **ESTADO:**  **PAÍS:**  **CON RESPECTO A SU LENGUA INDÍGENA, DEL 1 AL 10, CUÁNTO:**  **LA ENTIENDE LA HABLA \_\_\_\_\_\_ LA ESCRIBE \_\_\_\_\_\_**  **¿HAY ALGO QUE QUIERA AGREGAR AL RESPECTO?** |

## 3. LIDERAZGO

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| **DESCRIBA AMPLIAMENTE DE QUÉ FORMA Y DESDE CUÁNDO HA EJERCIDO SU LIDERAZGO (EN COMUNIDAD, ORGANIZACIONES INDÍGENAS, DOCENTES, ÁMBITO EDUCATIVO, PROMOCIÓN CULTURAL, ETC.)** |

**4. PROYECTO COMUNITARIO A IMPLEMENTAR**

**1. Nombre del proyecto:**

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**2. Población objetivo con la que va a trabajar para el desarrollo comunitario:**

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**3. Localidad, Municipio, Estado donde se llevará a cabo:**

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**4. Problemática a resolver:**

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**5. Justificación**

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**6. Objetivo general:**

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**7. Objetivos específicos:**

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**8. Metodología a implementar:**

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**9. Duración del Proyecto:**

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**10. Cronograma de actividades (desglose mensual):**

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| **Mes** | **Actividades a realizar** |
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**11. Presupuesto; desglosando mensualmente los gastos a ejercer para el desarrollo del proyecto.**

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| **Rubro** | **Descripción** | **Precio unitario** | **Cantidad total** | **Monto total** |
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**\*Indicar, en su caso, los recursos con los que se cuenta (insumos, infraestructura, materiales, humanos, financieros, etc.)**

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**11. Resultados y metas esperadas:**

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**5. EXPOSICIÓN DE MOTIVOS**

**DESCRIBA LOS MOTIVOS POR LOS QUE DESEA PARTICIPAR EN ESTA CONVOCATORIA:**

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**Firma del Solicitante**