**SOLICITUD DE ANULACIÓN DE SEMESTRE O MATERIA**

Guayaquil,

Doctor

Marcos Buestan Benavides

**Subdecano (s) FIMCP**

Presente:

Yo, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ estudiante de la carrera \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ de la FIMCP con número de matrícula \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, solicito a usted se me conceda la anulación del PAO ( ) 202\_ / registro ( ) en la(s) siguiente(s) materia(s):

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| CODIGO | MATERIA |
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El(Los) **motivo(s)** de esta solicitud se debe a:

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Atentamente,

Firma

C. I.:

Correo:

Celular:

**Nota:** En base al artículo 28 del Reglamento de Grado de la ESPOL y el Reglamento Académico Vigente última revisión (25 de agosto de 2020).