**Solicitud de inscripción de candidatura a:**

**Decano de la Facultad de \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**de la Universidad Nacional de Asunción**

Fecha: Día\_\_\_\_\_/Mes\_\_\_\_\_\_\_\_\_/Año\_\_\_\_\_\_\_

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| **INFORMACIÓN DEL CANDIDATO** | | | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | |
| Primer nombre |  | | Segundo nombre |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | |
| Primer apellido |  | | Segundo apellido |
| Teléfono:  Celular: | | Correo electrónico: | |

Pegar foto

3 cm x 3 cm

**Categoría : \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_**

**Firma : \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_**

**C.I.C. N° : \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_**