**FORMATO DE SOLICITUD DE BECA ALIMENTICIA**

**MTRA. IRMA YOLANDA ORTIZ ACOSTA**

DIRECTORA ESCUELA PREPARATORIA No. 7 UABJO

PRESENTE

**AT´N MTRO. CARLOS DE JESUS OSORIO VASQUEZ**

COORDINADOR DE BECAS PREPARATORIA No. 7 UABJO

PRESENTE

Yo, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_estudiante de la Escuela Preparatoria No. 7 del grupo \_\_\_\_\_\_\_\_\_\_\_\_\_, correspondiente al turno \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ del \_\_\_\_\_\_\_\_\_\_\_\_\_\_ semestre, me permito solicitar a usted, en su carácter de Directora, se analice la posibilidad de otorgarme una Beca alimenticia:

(Solamente señale una característica).

PRIMERA VEZ

RENOVACIÓN

A continuación, anoto los *motivos* debido a los cuales solicito la beca alimenticia para el actual semestre (2024-2024):

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**Atentamente**

Nombre y Firma: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_