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| |  | | --- | | **FORMATO PEEB-001**  **SOLICITUD DE BECA**    **H. AYUNTAMIENTO DE VILLA DE ALVAREZ** | | | | | | | | | | | | | | | | | | | |
| **Dirección General de Planeación y Desarrollo Social** | | | | | | | | | | | | | | | | | | |
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| **PROGRAMA ESTÍMULOS A LA EDUCACIÓN BÁSICA** | | | | | | | | | | | | | | | | | | |
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| **SOLICITUD DE BECA\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*No.\_\_\_\_\_\_\_\_\_** | | | | | | | | | | | | | | | | | | |
| NOMBRE DEL ALUMNO: | | | |  | | | | | | |  |  | | | |  |  | |
| PLANTEL ESCOLAR AL QUE ESTA INSCRITO: | | | | | | | | |  | | | | | | |  |  | |
| TURNO: |  | | | | | | | GRADO: | |  | | C.U.R.A. |  | |  | | | |
| C.U.R.P. |  | | | | | | |  | |  | |  | |  |  | | | |
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| NOMBRE DEL PADRE O TUTOR: | | | | |  | | | | | | |  | |  |  | | | |
| DOMICILIO: | |  |  | | | | | | |  | | COLONIA: | |  |  | | | |
| ENTRE LAS CALLES: | | |  | | | | | | |  | | Y | |  |  | | | |
| TELEFONO: | | |  | | | |  | | |  | |  | |  |  | | | |
| OCUPACION: | | |  | | | | | | |  | |  | | |  | | | |
| DEL PADRE: | | |  | | | | | | |  | | INGRESO (MENSUAL): | | |  | | | |
| DE LA MADRE: | | |  | | | | | | |  | | INGRESO (MENSUAL): | | |  | | | |
| No. DE INTEGRANTES DE LA FAMILIA: | | | | | | | | | |  | |  | | | |  |  | |
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| MOTIVOS POR LOS QUE SOLICITA LA BECA: | | | | | | | | | | | |  | | | |  |  | |
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| FIRMA DEL SOLICITANTE: | | | | | | | |  | | |  | FECHA: \_\_\_\_\_\_\_\_\_\_\_ | | | |  |  | |
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