REPÚBLICA BOLIVARIANA DE VENEZUELA  
MINISTERIO DEL PODER POPULAR PARA LA DEFENSA  
UNIVERSIDAD NACIONAL EXPERIMENTAL

**FOTO**

POLITÉCNICA DE LA FUERZA ARMADA NACIONAL

NÚCLEO PORTUGUESA SEDE GUANARE

FECHA: / /

**PLANILLAS DE DATOS PERSONALES**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| APELLIDOS | | | | |  | | | | | | | | | | | | | | | | | |
| NOMBRES: | | | | |  | | | | | | | | | | | | | | | | | |
| CARRERA: | | | | |  | | | | | | | | | | | | | | | | | |
| FECHA DE NACIMIENTO: | | | | | | | | |  | | | | | | | | | | | | | |
| LUGAR DE NACIMIENTO: | | | | | | | | |  | | | | | | | | | | | | | |
| V |  | E |  | | | CEDULA DE IDENTIDAD | | | | | | | | | |  | | | | | | |
| SEXO | | | (F) | | |  | | (M) | |  | | |  | | | | | | | | | |
| TIENE ALGUNA DISCAPACIDAD | | | | | | | | | | | NO |  | | | SI | |  | | | INDIQUE: | |  |
|  | | | | | | | | | | | | | | | | | | | | | | |
| CONDICION: | | | | CIVIL | | |  | | | MILITAR: | | | |  | | | | GRADO | | |  | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| NÚMEROS DE TELÉFONO: | | | | | | | | | | HAB. | | | | | | | | |  | | | |
|  | | | | | | | | | | TRAB. | | | | | | | | |  | | | |
|  | | | | | | | | | | CELULAR | | | | | | | | |  | | | |
|  | | | | | | | | | | OTRO CONTACTO | | | | | | | | |  | | | |
| CORREO ELECTRONICO | | | | | | | | | |  | | | | | | | | | | | | |
| DIRECCIÓN DE HABITACIÓN: | | | | | | | | | |  | | | | | | | | | | | | |
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**FIRMA**