**REPUBLICA DE COLOMBIA**

**DEPARTAMENTO DE ANTIOQUIA**

**COMISARIA SEGUNDA DE FAMILIA DE GIRARDOTA**

**TRÁMITE ADMINISTRATIVO DE VERIFICACIÓN Y RESTABLECIMIENTO DE DERECHOS DE NNA**

Fecha: \_\_\_/\_\_\_\_\_\_\_/\_\_\_\_

Historia No.:

Datos de Identificación:

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| --- | --- | --- | --- |
| Nombre: | | | Sexo: |
| Fecha y lugar de nacimiento: | | | Edad: |
| Escolaridad: | Ocupación: | | |
| Objetivo de la sesión: | | Entrevista Número: | |

\*Uno por cada participante cuando es conjunta.

* 1. Metodología y Duración\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* 1. Desarrollo del Proceso.

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* 1. Percepciones del NNA frente al trámite.

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* 1. Conclusiones y Sugerencias.

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Firma\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nombre\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Documento de Identidad\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MAURICIO TASCON TORRES JULY CADAVID ZAPATA**

**Psicólogo Comisaria II Trabajadora Social Comisaria II**

**GABRIELA MARIA GUZMÁN VÁSQUEZ**

**Comisaria Segunda de Familia**

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**MAURICIO TASCON TORRES**

**Psicólogo Comisaria II**

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**JULY CADAVID ZAPATA**

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**GABRIELA MARIA GUZMÁN VÁSQUEZ**

**Comisaria Segunda de Familia.**