**FORMULARIO DE RENDICIÓN DE CUENTAS DE BECAS**

**INSTITUCIÓN**: Rectorado UNA

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | 1 | | Beneficiario: | | | | | | | | | C.I. Nº: | | | |
|  | 2 | | Unidad Académica proponente: | | | | | | Grado: | | | Postgrado: | | | |
|  | 3 | | Carrera/Programa de Postgrado: | | | | | | | | | | | | |
|  | 4 | | Contrato de Otorgamiento de Becas de Grado/Postgrado Nº: | | | | | | | | | Fecha : | | | |
|  | 5 | | Beca asignada: (Monto ₲ ): | | | | | | | | | | | | |
|  | 6 | |  | | | | | | | | | | | | |
|  | 7 | |  | | | | | | | | | | | | |
|  | 8 | |  | | | | | | | | | | | | |
|  | 9 | | Detalle de gastos incurridos: | | | | | | | | | | | | |
|  |  | **Descripción.** | | |  | **Comprobante** | | | | | | |  | **Total por**  **Descripción ₲** |  |
|  |  | | | |  | **Fecha** |  | **Nro.** | |  | **Total ₲** | |
|  | a) | | | Matrícula (Debe corresponder al periodo  académico 2020) |  | |  | | |  | | |  | |  |
|  |  | | |  |  | |  | | |  | | |  | |  |
|  | b) | | | Cuotas (Debe corresponder al periodo  académico 2020) |  | |  | | |  | | |  | |  |
|  |  | | |  |  | |  | | |  | | |  | |  |
|  | c) | | | Derecho a Examen, Multas y otros gastos  académicos |  | |  | | |  | | |  | |  |
|  |  | | |  |  | |  | | |  | | |  | |  |
|  | e) | | | Alimentación (No incluye bebidas alcohólicas) |  | |  | | |  | | |  | |  |
|  |  | | |  |  | |  | | |  | | |  | |  |
|  | f) | | | Gastos de traslado (Pasajes, combustibles,  otros) |  | |  | | |  | | |  | |  |
|  |  | | |  |  | |  | | |  | | |  | |  |
|  | g) | | | Estadía |  | |  | | |  | | |  | |  |
|  |  | | |  |  | |  | | |  | | |  | |  |
|  | h) | | | Textos |  | |  | | |  | | |  | |  |
|  |  | | |  |  | |  | | |  | | |  | |  |
|  | i) | | | Folletos |  | |  | | |  | | |  | |  |
|  |  | | |  |  | |  | | |  | | |  | |  |
|  | j) | | | Gastos de Internet |  | |  | | |  | | |  | |  |
|  |  | | |  |  | |  | | |  | | |  | |  |
|  | TOTAL GASTOS INCURRIDOS (a+b+c+d+e+f+g+h+i+j) | | | | | | | | | ₲ | | |  | |  |

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|  |  |
| Firma del Beneficiario | Aclaración de Firma |
|  |  |
| Nro. de Cédula de Identidad Civil |