**FORMULARIO DE REGISTRO**

**TECNICO MUNICIPAL FORM. 2**

**1. DATOS PERSONALES TÉCNICO MUNICIPAL:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Nº cédula de identidad: | | Expedido en: (*Marcar*) | | | | | | | |
|  | | CH | LP | CB | | OR | | PO | |
| TJ | SC | BN | | PN | |  | |
| Nombre/s: | | | | | | | | | |
|  | | | | | | | | | |
| Apellidos: | | | | | | | | | |
|  | | | | | | | | | |
| Fecha nacimiento: | Día: \_\_\_\_\_\_ Mes \_\_\_\_\_\_\_\_ Año \_\_\_\_\_\_\_\_\_\_ | | | | Sexo: | | H | | M |

|  |
| --- |
| Nombre del gobierno autónomo municipal: |
|  |
| Cargo(s) que desempeña en el gobierno municipal: |
| 1. |
| 2. |
| 3. |

**2. DATOS DE CONTACTO**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Teléfono | Celular | Telf. | Fax | Número/dato | **Marcar** | |
| **Personal** | **Institucional** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Correo electrónico** |  | | | |  |  |
|  | | | |  |  |

|  |  |
| --- | --- |
| Fecha registro: | / / |