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| **APPRENTICESHIP HOURS*****HORAS DE PRACTICA***  |
| **NAME / *NOMBRE:*** |       |
| **VISITING PARISH / ORGANIZATION: *PARROQUIA U ORGANIZACIÓN QUE VISITÓ:*** |       |
| **AREA OF MINISTRY:** ***AREA DE MINISTERIO:*** |       |
| **MINISTRY DIRECTOR / COORDINATOR: *COORDINADOR/DIRECTOR DEL MINISTERIO:*** |       |
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| **DATE *FECHA:*** | **HOURS *HORAS:*** | **LOCATION / CONTACT** ***LUGAR / CONTACTO*** |
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| **TOTAL SESSIONS*****# DE SESIONES:*** |       | **TOTAL HOURS** ***TOTAL DE HORAS:*** |       |
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Rev 11/09/15