**ANEXO 1**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| |  | | --- | | **Programa de Apoyo a Jóvenes Herederos del Campo 2023**  **FOLIO**  **Componente 1: Jóvenes herederos.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **SOLICITUD DE APOYO** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **LIC. ANA LUCÍA CAMACHO SEVILLA** | | | | |  | | |  | |  | | |  | |  | | |  | | |  | |  | | | |  | | | |  | | | | |
| **SECRETARIA DE AGRICULTURA Y DESARROLLO RURAL** | | | | |  | | |  | |  | | |  | |  | | |  | | |  | |  | | | |  | | | |  | | | | |
| P R E S E N T E: |  | | | |  | | |  | |  | | |  | |  | | |  | | |  | |  | | | |  | | | |  | | | | |
| Me permito solicitar a usted apoyo para el desarrollo de nuestro proyecto productivo que otorga el programa de Apoyo a Jóvenes Herederos del Campo, para el cual proporciono mis datos y documentos requeridos, manifestando que son verídicos, comprometiéndome a cumplir con los requisitos de elegibilidad y de proyecto, establecidos en los lineamientos vigentes. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Datos del solicitante |  | | | |  | | |  | |  | | |  | |  | | |  | | |  | |  | | | | | |  | |  | | | | |
| Nombre del Solicitante | | | | | | | | | | | | | | | | | | | | | | | | | | Número de Empleos a Generar | | | | | | | |
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| 2. Nombre del Proyecto y Giro | | | | |  | | |  | |  | | |  | |  | | |  | | |  | |  | | | | | |  | |  | | | | |
| Nombre | | | | | Producción | | | | | | | | Servicios | | | | | | | | Transformación | | | | | | | | Comercialización | | | | | | |
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| 3. Datos del solicitante | | | |  | | |  | | |  | |  | | |  | |  | | |  | | | | |  | | | |  | | | |  | | | | |
| Nombre | | Apellido Paterno | | Apellido Materno | | | | | | | | | | | | | Estado Civil | | | | | | | | Edad | | | | | Género | | | | | | | |
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| Estado Civil | | Edad | | Género | | | | | | | | | | | | | CURP | | | | | | | | | | | | | | | | | | | | |
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| Calle y Número | | | | | | | | | | | | | | | | | Colonia o sector | | | | | | | | | | | | | | | | | | | | |
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| Código Postal | | Localidad | | | | | | | | | | | | | | | Municipio | | | | | | | | | | | | | | | | | | | | |
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| RFC | | Lada y Teléfono | | | | | | | | | | | | | | | Correo electrónico | | | | | | | | | | | | | | | | | | | | |
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| 4. Inversión del Proyecto (Aportaciones) | | | | |  | | |  | |  | | |  | |  | | |  | | |  | |  | | | |  | | | |  | | | | |
| GOB DEL ESTADO | BENEFICIARIO | | | | | | OTRAS APORTACIONES | | | | | | | | | | | | | | | T O T A L (100%) | | | | | | | | | | | | |
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| A T E N T A M E N T E | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| En la localidad de \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Municipio de \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Jalisco. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A\_\_\_\_\_\_\_\_\_\_\_ de \_\_\_\_\_\_\_\_\_\_\_\_\_\_ del 2023 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| FIRMA DEL SOLICITANTE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |