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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Fecha** | | | **No. de Radicación** | | | **Forma de Recepción** | | **Nombre(s) y Apellido (s)** | | | |
| DD | MM | AAAA |  | | | **Personal Telefónico** | |  | | | |
| **Edad** | **Documento de Identidad** | | | **CC** |  | **No. Telefónico o Celular** | | **Correo electrónico** | | | |
|  |  | | | **TI** |  |  | |  | | | |
| **Dirección de Residencia** | | | | | | | **Barrio** | | **Urbano** | **Rural** | **Vereda** |
|  | | | | | | |  | |  |  |  |
| **Tipo de Situación** | | | | | | | | | | | |
| **Petición Queja Reclamo Sugerencia** | | | | | | | | | | | |
| **Descripción de la Situación** | | | | | | | | | | | |
|  | | | | | | | | | | | |
| **¿Anexa Documento(s)?: Sí No ¿Cuál(es)?:** | | | | | | | | | | | |
| **Firma\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | | | |

**Recibido\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fecha \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**