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| **Fecha** |  | | | **Proceso** |  |
| **Responsable** |  | | | **Fecha de inicio** |  |
| **Problema** |  | | | **Fecha final** |  |
| **Objetivo** |  | | | **Duración** |  |
| **Problemas** | **Jueves** | **Viernes** | **Sábado** | **Domingo** | **Total** |
| **Problema 1** |  |  |  |  |  |
| **Problema 2** |  |  |  |  |  |
| **Problema 3** |  |  |  |  |  |
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|  |  |  |  |  |  |
| **Total** |  |  |  |  |  |
| **Observaciones** |  |  |  |  |  |
| **Nombre completo del inspector** |  | | | | |
| **Firma** |  | | | | |