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| **Personenbezogener Wochennachweis** | | | | | | |  |
| von den Teilnehmer\*innen zu führen und von den Lernberater\*innen abzuzeichnen | | | | | | |
| Name |  | | Vorname |  | |  |
| Lehrgang |  | | | | |  |
| Kalenderwoche |  | von |  | bis |  |  |
|  | | | | | | |

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| Wochen-tag | UE | Inhalt / Kommentar | | Modul | Modulstunden | | EK | UE/Tag | Unterschrift  Teilnehmer\*in |
|  | geleistet | offen/von |  |
| Montag | 1 |  | |  |  |  |  |  | Übertrag: |
| 2 |  | |  |  |  |  |  |
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| 7 |  | |  |  |  |  |
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| 9 |  | |  |  |  |  |  |  |
| Dienstag | 1 |  | |  |  |  |  |  |  |
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| Mittwoch | 1 |  | |  |  |  |  |  |  |
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| Donnerstag | 1 |  | |  |  |  |  |  |  |
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| Freitag | 1 |  | |  |  |  |  |  |  |
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|  | | | Wochenstunden gesamt | | | | |  | Übertrag: |

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|  | Datum |  | Unterschrift Lernberater\*in |  |  |
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