**LISTA OBECNOŚCI NA ZAJĘCIACH z: ……………………………………………**

**Miesiąc: ……………………………. …………………..r.,**

**NR listy ………………..**

**Nazwisko i imię nauczyciela: ………………..**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Lp.** | Data[[1]](#footnote-1)nazwisko |  |  |  |  |  |  |  |  |  |
| 1 |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |
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| 4 |  |  |  |  |  |  |  |  |  |  |
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 *podpis nauczyciela*

**KARTA CZASU PRACY ZAJĘĆ z: ………………….**

**Miesiąc: ……………………. ………………..r.,**

**NR listy ……………..**

**Nazwisko i imię nauczyciela: ……...**

|  |  |  |
| --- | --- | --- |
| **Data** | **Temat zajęć** | **Ilość godzin** |
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 *podpis nauczyciela*

1. W kolumnie daty uczestnicy potwierdzają podpisem udział w zajęciach [↑](#footnote-ref-1)