Dzienniki zajęć

logo placówki

###### grupy........................

**rok** **............................**

**wychowawca........................**

Nazwa placówki: .......................................................................................

Adres placówki: .........................................................................................

**Tygodniowy rozkład zajęć**

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| poniedziałek | Wtorek |
| Środa | Czwartek |
| Piątek | |

##### Lista uczestników grupy

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| **LP.** | **NAZWISKO, IMIĘ** | ADRES | TELEFON | **DATA URODZENIA** | **PESEL** |
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# LISTA OBECNOŚCI

**MIESIĄC ...........................................**

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| **L.p.** | **Nazwisko, imię** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | S |
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**MIESIĄC ...........................................**

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| **L.p.** | Nazwisko, imię |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | S |
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| **DATA/GODZINY** | RODZAJ ZAJĘĆ |
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***Uwagi*** ........................................................................................................................................

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ZAJĘCIA INDYWIDUALNE

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| DATA/GODZINA | UCZESTNIK I PRZEBIEG ZAJĘĆ |
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Kontakty z rodzicami/opiekunami

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| DATA/ Z kim? | PODJĘTA KWESTIA / ustalenia |
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Kontakty z instytucjami

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| DATA/ Z kim? | PODJĘTA KWESTIA / ustalenia |