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| Tag | Ausgeführte Arbeiten, Unterricht, Unterweisungen usw. | Einzel-  stunden | Gesamt-  stunden | Ausbild.-  Abt. |
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| Samstag |  |  |  |  |
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Besondere Bemerkungen

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| Auszubildende/r | Ausbildende/r bzw. Ausbilder/in |
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Für die Richtigkeit

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| Datum | Unterschrift Auszubildende/r | Datum | Unterschrift Ausbildende/r bzw. Ausbilder/in |