**1. Halbjahr**

Kurs:       Schuljahr:

|  |  |  |
| --- | --- | --- |
| Referendar/in:Familienname:       | **Stundenplan** **1. Ausbildungsabschnitt** | Formular verbleibt beim Ausbilder/der Ausbilderin |
| Vorname**:**       | gültig ab:       |
|  | Ausbildungsschule |  |
| **Unterschrift:** | Name, Schulort: |       |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Zeit****Beginn Ende** | **Montag****Fach Klasse** | **Dienstag****Fach Klasse** | **Mittwoch****Fach Klasse** | **Donnerstag****Fach Klasse** | **Freitag****Fach Klasse** |
|  |             |             |             |             |             |             |
|  |             |             |             |             |             |             |
|  |             |             |             |             |             |             |
|  |             |             |             |             |             |             |
|  |             |             |             |             |             |             |
|  |             |             |             |             |             |             |
|  |             |             |             |             |             |             |
|  |             |             |             |             |             |             |
|  |             |             |             |             |             |             |
|  |             |             |             |             |             |             |
|  |             |             |             |             |             |             |
| Su |             |             |             |             |             |             |