**Grundkompetenzen Erwachsene: Präsenzliste Firmenkurs-Nummer:**

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| **Kriterien** | **Beschreibung** | | | | | | | | | | | | | | | |
| **A) Anbieter** | | | | | | | | | | | | | | | | |
| Anbieter: |  | | | | | | | | | | | | | | | |
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| **B) Betrieb (Firma)** | | | | | | | | | | | | | | | | |
| Betrieb: |  | | | | | | | | | | | | | | | |
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| **C) Kurs gemäss Weiterbildungsgesetz Art. 12** | | | | | | | | | | | | | | | | |
| Kursdaten von - bis: |  | | | | | | | | | | | | | | | |
| Kursort: |  | | | | | | | | | | | | | | | |
| Kursleitung (Tel., Email): |  | | | | | | | | | | | | | | | |
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| **D) Präsenzangaben Teilnehmer/-in** | | |  | **Einträge Kurstage und Visum-Kürzel der Teilnehmenden** | | | | | | | | | | |  |  |
| **Name / Vorname** | **PLZ / Ort** | **Geburts- datum** | **Geschlecht w / m** |  |  |  |  |  |  |  |  |  |  |  | **Kurs- präsenz in %** | **Bemerkung** |
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| **E) Unterschrift Kursleiter/-in** | | | | | | | | | | | | | | | | |
| Ort, Datum: | Unterschrift Kursleiter/-in: | | | | | | | | | | | | | | | |

mit Subventionsabrechnung einreichen an [hanspeter.steiner@sg.ch](mailto:hanspeter.steiner@sg.ch) (Telefon 058 229 38 78)