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| Name, Vorname:  Klasse: | Tätigkeitsbeschreibung Nr. 11 | Datum: |

**Thema:** ………………………………………………………………………………………..

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| Delmenhorst, \_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Praktikumsbetrieb  Ausbilder/in, Adresse |  | Delmenhorst, \_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Fachlehrer/in |