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| **Rechtsref.:** | | | | | | | | | | | | | | | | | | | | | | | | | | | Name, Vorname einfügen | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Ausbilderin/Ausbilder:** | | | | | | | | | | | | | | | | | | | | | | | | | | | Name einfügen | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Unterbrechungen/Fehlzeiten:**Unterbrechungen bzw. Fehlzeiten einfügen | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Art der Leistung (Ausbildungsplan, Zweiter Teil Zweiter Abschnitt Zweiter Titel Erstes Kapitel) Aktenzeichen** | | | | | | | | | | | | | | | | | | | | | | | | **Anforderungen (Inhalt, Umfang, Schwierigkeitsgrad, Bearbeitungsfrist)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Beurteilung (Darstellung, rechtliche Würdigung, praktische Verwendbarkeit)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Note** | | | | | | | | | | | | | | | | | | | |
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| **Ausbildungsnachweis abgeschlossen am:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Ausbilderin/Ausbilder:** | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | **Rechtsreferendarin/Rechtsreferendar:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Ort, Datum** | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | |  | | | |  | | |  | | | |  | |  | | |  | | | | | **Unterschrift** | | | | | | | | | | | |  | | | |  | | |  | | |  | | |  | | | |  | | |  | |  | | | |  | | | | **Ort ,Datum** | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | |  | | | | |  | | | | | | |  | | | |  | | |  | |  | | | | |  | | | |  | **Unterschrift** | | | | | | | | | | | | | | |  |  | | | |  | | | |  | | | |  |  | | | |  | | | |  |