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| **Übungsart** | |  | | | **Datum** |  | | |
| **Ausbilder** | |  | | | **Zeit / Dauer** |  | | |
| **Arbeitsplatz** | |  | | | **Übungsleiter** |  | | |
| **Thema:** | | | | | **Grundlage** | | | |
| **TLF Einsatz** | | | | |  | | | |
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| **Teilnehmeranalyse:** | | | | | | | | |
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| **Ziele:** | | | | | | | | |
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| **Beurteilungskriterien** | | | | | | | | |
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| **Ausrüstung** | | | **Material** | | | | **Fahrzeug(e)** | |
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| **Bemerkungen/methodische Hinweise** | | | | | | | | |
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| **Zeit** | **Lektionsablauf** | |
| 5‘ | **Einstieg:** | |
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| 20 ‘ | **Übung** | |
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| 5` | **Zusammenfassung:** | |
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