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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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