**GTS - Lerndokumentation**

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| **Schüler/in:** |  | | |
| **Schule / GTS-Gruppe:** |  | **Datum / Schulwoche:** |  |

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| **Montag** | **Gegenstandsbezogene Lernprozess - Dokumentation** | **Bearbeitet** |
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| **Dienstag** | **Gegenstandsbezogene Lernprozess - Dokumentation** | **Bearbeitet** |
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| **Mittwoch** | **Gegenstandsbezogene Lernprozess - Dokumentation** | **Bearbeitet** |
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| **Donnerstag** | **Gegenstandsbezogene Lernprozess - Dokumentation** | **Bearbeitet** |
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| **Freitag** | **Gegenstandsbezogene Lernprozess - Dokumentation** | **Bearbeitet** |
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