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| ***Wird von der Abt. bilden + tagen ausgefüllt*** |  |
| ***Gesamtzahl UE´s*** |  | ***Zuschuss*** |  |
| ***Anzahl VA-Tage*** |  |  |  |
| ***Gesamtzahl TTg*** |  | ***Zuschuss*** |  |
| 🞎 ***Keine Auszahlung*** *(über Budget)* |  |
| 🞎 ***Zuschuss WbG \_\_\_\_\_\_\_\_\_\_\_\_ € UE / TTg*** |  |
| 🞎 ***Zentralveranstaltung*** |  |
| *Referenten Honorare* |  |  |
| *sonstige Ausgaben Referenten* |  |  |
| *abzgl. WBG-Zuschuss* |  |  |
| *abzgl. TN-Gebühren* |  |  |
|  |
| *Gesamt ZVA:* |  |  |
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| ***ZUSCHUSS GESAMT*** |  |  |
| *Kurs für Detmold abgeschlossen:*  |  |  |
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| KEFB-Geschäftsstelle / Dekanatsbildungswerk / verbandl. BW |
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| ***Veranst.-Nr.*** |  |  |

***Nachweis über die Durchführung einer Bildungsveranstaltung (Reihenkurs)*** |
| ***Thema der Veranstaltung:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Beginndatum: \_\_\_\_\_\_\_\_\_\_\_\_\_ Uhrzeit: von \_\_\_\_\_\_\_\_\_\_\_ bis \_\_\_\_\_\_\_\_\_\_\_****Letzter Kurstag: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Kursort: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Dozent\*in: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*****Dauer: \_\_\_\_\_\_UE******Anzahl der Teilnehmenden******über 15 Jahre:******bitte unbedingt ausfüllen!****Es wird bestätigt, dass die oben angegebene Anzahl der Teilnehmenden an der Kursreihe teilgenommen hat.**Die Kursreihe fand an folgenden Tagen statt:****(nichtzutreffende Tage bitte streichen, zusätzliche Tage bitte ergänzen)******\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_******Datum/ Unterschrift Veranstaltungsleitung*** |

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|  | Bildungsstätte / Dekanatsbildungswerk /verbandl. BW |
| **Veranst.-Nr.** |  | Semester |
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| **Thema der Veranstaltungsreihe:** |  |
| **Einzelthemen** |
| **Datum** | **Einzelthema (pro Veranstaltungstag):** |
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| **Nr.** | **Vorname** | **Nachname** |
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