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| **Fremmødeliste** | | | | | | | | | | | | |
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| **Navn på praktikant:** |  | | | | | **Virksomhed:** | | |  | | | |
| **Fødselsdato:** |  | | | | | **Adresse:** | | |  | | | |
| **Timer/uge** |  | | | | |  | | |  | | | |
| **Periode:** |  | | **til** | | |  | | | **tlf:** |  | | |
| **Kontaktperson i jobcenteret:** |  | | | | | **e-mail:** | | |  | | | |
| **Kontaktperson i virksomheden** |  | | | | | **e-mail:** | | |  | | | |
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| **Dato** | **Mødt (x)** | **Fraværsårsager** | | | | | | | | | | |
| **Sygdom (x)** | | | **Barn syg (x)** | | | **Udeblivelse skriv årsag:** | | | | |
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| **Timesedlerne bedes indsendt pr. mail til :** | | | | | | | | **0** | | | | |
| **eller pr. mail til:** | | | | | | | | [jobcenter@aabenraa.dk](mailto:jobcenter@aabenraa.dk) | | | | |
| **du kan også sende pr. brev til:** | | | | | | | | **Jobcenter Aabenraa** | | | |  |
|  | |  | |  | | |  | **Kallemosen 20** | | | |  |
|  | |  | |  | | |  | **6200 Aabenraa** | | | |  |