**…………………………........OKULU MÜDÜRLÜĞÜ**

**EĞİTİM TEDBİRİ ÖĞRENCİ DEVAM-DEVAMSIZLIK TAKİP ÇİZELGESİ**

**AİT OLDUĞU YIL:**

**AİT OLDUĞU AY:**

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| --- |
| **Öğrencinin ;** |
| **Adı-Soyadı** |  |
| **T.c. Kimlik No;** |  |
| **Sınıf;** |  |
| **Okul No;** |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **13** | **14** | **15** | **16** | **17** | **18** | **19** | **20** | **21** | **22** | **23** | **24** | **25** | **26** | **27** | **28** | **29** | **30** | **31** |
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**OKUL MÜDÜRÜ**