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| **LISTA OBECNOŚCI NA SZKOLENIU / WARSZTATACH W ZAKRESIE OPERACJI DOTYCZĄCEJ WZMOCNIENIA KAPITAŁU SPOŁECZNEGO,  W TYM PODNOSZENIE WIEDZY SPOŁECZNEJ LOKALNEJ W ZAKRESIE OCHRONY ŚRODOWISKA, ZMIAN KLIMATYCZNYCH, INNOWACYJNOŚCI** | | | | | | | | | | | | | | | | |
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|
| Znak sprawy UM – numer umowy | | |  |  |  |  |  |  | |  | |  | | |
| ……………………………………………………………………………………..………………………………………… | | | | | | | | | | |  | | |
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| Tytuł operacji i nazwa zadania: | | |  |  |  |  |  |  | |  | |  | | |
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| Data i miejsce realizacji: | | |  |  |  |  |  |  | |  | |  | | |
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| Liczba uczestników  planowana (według umowy): | | | |  | | Liczba uczestników rzeczywista | |  | |  | | | | |
|
| Lp. | Imię i nazwisko | | | Adres zamieszkania | | Telefon i e-mail | | | Podpis uczestnika | | Ocena szkolenia  (adekwatne / nieadekwatne) | | | | |
| 1. |  | | |  | |  | | |  | |  | | | | |
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|  | *miejscowość i data* | | | | |  | *podpis Beneficjenta / osób reprezentujących Beneficjenta / pełnomocnika* | | | | |  | | |
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