**ARKUSZ MONITORINGU REALIZACJI PODSTAWY PROGRAMOWEJ ROK SZKOLNY 2017/2018**

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**Nazwisko i imię**

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| **Nazwa nauczanego przedmiotu** | **KLASY** | | | | | | | | | | | | | |
| **Klasa** | | **Klasa** | | **Klasa** | | **Klasa** | | **Klasa** | | **Klasa** | | **Klasa** | |
| **IL. G.**  **ZAPL.** | **IL. G.**  **ZREAL.** | **IL. G.**  **ZAPL.** | **IL. G.**  **ZREAL.** | **IL. G.**  **ZAPL.** | **IL. G.**  **ZREAL.** | **IL. G.**  **ZAPL.** | **IL. G.**  **ZREAL.** | **IL. G.**  **ZAPL.** | **IL. G.**  **ZREAL.** | **IL. G.**  **ZAPL.** | **IL. G.**  **ZREAL.** | **IL. G. ZAPL.** | **IL. G.**  **ZREAL.** |
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| **Nazwa nauczanego przedmiotu** | **KLASY** | | | | | | | | | | | | | |
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| **IL. G.**  **ZAPL.** | **IL. G.**  **ZREAL.** | **IL. G.**  **ZAPL.** | **IL. G.**  **ZREAL.** | **IL. G.**  **ZAPL.** | **IL. G.**  **ZREAL.** | **IL. G.**  **ZAPL.** | **IL. G.**  **ZREAL.** | **IL. G.**  **ZAPL.** | **IL. G.**  **ZREAL.** | **IL. G.**  **ZAPL.** | **IL. G.**  **ZREAL.** | **IL. G. ZAPL.** | **IL. G.**  **ZREAL.** |
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| **Nazwa nauczanego przedmiotu** | **KLASY** | | | | | | | | | | | | | |
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Oświadczam, że zrealizowałam treści programowe zawarte w *Podstawie programowej*

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Data, podpis