**Luuise-Weiterbildung, Zyklus 1** – 2 – 3 (Durchführungsjahr) **Luuise-Coachs: NN/NN**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Schule, Institution, Ort: | | | | | | | | |
| Organisation an Schule (Name, E-Mail, Telefon Festnetz, Telefon Mobil): | | | | | | | | |
| Leitender Luuise-Coach (Name, E-Mail, Telefon Festnetz, Telefon Mobil): | | | | | | | | |
| Co-Kursleitung (Name, E-Mail): | | | | | | | | |
| Stagiaire (Name, E-Mail): | | | | | | | | |
| **Termin/Ort Informationsanlass:** | | | **Termin/Ort Starttag:** | | **Termin/Ort Zwischenstopp:** | | **Termin/Ort Präsentationsanlass:** | |
| **Kursteilnehmende** | | | | | | | | |
| *Herr/Frau* | *Vorname* | *Name* | | *E-Mail* | *U-fach* | *Titel des Projekts* | *Kurzbeschreibung der U/U-Methode* | *Bemerkungen* |
|  |  |  | |  |  |  |  |  |
|  |  |  | |  |  |  |  |  |
|  |  |  | |  |  |  |  |  |
|  |  |  | |  |  |  |  |  |