**Registro DELLO SPORTELLO DIDATTICO**

**A.S.\_\_\_\_\_\_/\_\_\_\_\_\_\_**

**Disciplina:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Docente:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Periodo in cui si effettua lo sportello didattico:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Numero di alunni iscritti:\_\_\_\_\_\_\_\_**

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| **DURATA CORSO** | **DAL** |  | **AL** |  |
| **ORE TOTALI (\*\*)** |  |

**ELENCO ALUNNI PARTECIPANTI ALLO SPORTELLO**

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**Relazione di programmazione iniziale dell’intervento di SPORTELLO** (il docente indicherà la natura delle carenze e gli obiettivi dell’azione di recupero):

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| **Cognome Nome** | **Classe** | **Orario inizio sportello** | **Orario fine sportello** | **Firma alunno** |
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**ARGOMENTI SVOLTI**

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| **DATA** | **N. ORE LEZIONI** | **ORARIO** | **ARGOMENTI SVOLTI** | **FIRMA DOCENTE** |
| **DALLE**  | **ALLE** |
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| **N. ORE TOTALI(\*\*)** |  |

**Relazione FINALE del CORSO di SPORTELLO DIDATTICO:**

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Lampedusa, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ IL DOCENTE DEL CORSO

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