**臺南市政府113年推動客語深根服務補助計畫**

**簽到表及教學日誌**

講師簽到：

計畫名稱：

上課日期/時間：

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **編號** | **姓名** | **簽名(或點名)** | **編號** | **姓名** | **簽名(或點名)** |
| 1 |  |  | 11 |  |  |
| 2 |  |  | 12 |  |  |
| 3 |  |  | 13 |  |  |
| 4 |  |  | 14 |  |  |
| 5 |  |  | 15 |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |
| ※參加學員若為學齡前兒童，得以點名單替代簽到表。 | | | | | |
| **教學日誌** | | | | | |
|  | | | | | |