**سجل**

**تسليم أوراق الاجابة**

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| **المسئولية الادارية عن السجل** | | | |
| **العمل** | **الاسم** | **العمل بالمدرسة** | **ملاحظات** |
| **المسئول المباشر** |  | **وكيل الشؤون التعليمية** |  |
| **المشرف على السجل** |  |  |  |

**نموذج رقم ( 57 ) اسم النموذج: كشف تسليم أوراق الإجابة رمز النموذج (و.ت.ع.ن – 05 – 05)**

**الأسبوع ....................................... من الفترة ............... / ............... / هـ إلى ............... / ............... / هـ**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **الاسم** | **الأحد** | | **الإثنين** | | **الثلاثاء** | | **الأربعاء** | | **الخميس** | |
| **مادة1** | **مادة2** | **مادة1** | **مادة2** | **مادة1** | **مادة2** | **مادة1** | **مادة2** | **مادة1** | **مادة2** |
| **التوقيع** | **التوقيع** | **التوقيع** | **التوقيع** | **التوقيع** | **التوقيع** | **التوقيع** | **التوقيع** | **التوقيع** | **التوقيع** |
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| **اسم الملاحظ** | |  |  |  |  |  |  |  |  |  |  |
| **التوقيع** | |  |  |  |  |  |  |  |  |  |  |