**DZIENNIK ZAJĘĆ TRENINGOWYCH**

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| **Szkolenie:** wpisz KWMŁ / KWJM / KWJ /KWM |  | **Nr:** |  |

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| **Sport:** |  |
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| **Termin:** |  |
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| **Miejsce:** |  |
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| **Kierownik:** |  |

**Informacje organizacyjne**

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| Miejscowość: |  |
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| Ulica: |  |
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| Ośrodek: |  |
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| Telefon: |  |
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| Miejsce wyżywienia |  |
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| Obiekty treningowe |  |
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| Opieka lekarska |  |

**Kadra trenerska**

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| **Lp.** | **Imię i nazwisko** | **Klasa** |
| **1** |  |  |
| **2** |  |  |
| **3** |  |  |
| **4** |  |  |
| **5** |  |  |

**OBECNOŚĆ ZAWODNIKÓW NA ZAJĘCIACH PROGRAMOWYCH**

T – obecny; N – nieobecny

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| **Lp** | **Nazwisko i imię**  **zawodnika** | | **Data zajęć szkoleniowych** | | | | | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |  |  |
| 1 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 6 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 7 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 8 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 9 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 10 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 11 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 12 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 13 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
|  | II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 14 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
|  | II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 15 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
|  | II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 16 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
|  | II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 17 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
|  | II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 18 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
|  | II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 19 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
|  | II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 20 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
|  | II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 21 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
|  | II tren. |  |  |  |  |  |  |  |  |  |  |  |  |
| 22 |  | I tren. |  |  |  |  |  |  |  |  |  |  |  |  |
|  | II tren. |  |  |  |  |  |  |  |  |  |  |  |  |

*W razie potrzeby proszę o skopiowanie dodatkowych stron dziennika zajęć treningowych*

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podpis trenera

**ZAPIS ZAJĘĆ TRENINGOWYCH**

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| **Lp.** | **Data zajęć** | **Zapis treści zajęć treningowych** | **Liczba obecnych** | **godzin**  **szkolenia** |
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| 2 |  |  |  |  |
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| 4 |  |  |  |  |
| 5 |  |  |  |  |
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| 7 |  |  |  |  |
| 8 |  |  |  |  |
| 9 |  |  |  |  |
| 10 |  |  |  |  |
| 11 |  |  |  |  |
| 12 |  |  |  |  |
| 13 |  |  |  |  |
| 14 |  |  |  |  |
| 15 |  |  |  |  |
| 16 |  |  |  |  |
| 17 |  |  |  |  |
| 18 |  |  |  |  |

**Przebieg akcji**

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| **Zakres realizacji programu:** |
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| **Warunki treningowe:** |
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| **Warunki pobytu:** |
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| **Zmiany osobowe:** |
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| **Inne uwagi szkoleniowe i organizacyjne:** |
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| **Kontuzje i urazy:** |
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| **Problemy wychowawcze:** |
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| **Hospitalizacje:** |
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| **Opracował** |  | **Zatwierdził** |
| ……………………………………………………. podpisy trenerów prowadzących |  | ……………………………………………………. podpisy przedstawiciela BOZS |