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| Лого_Медколледж | **Министерство здравоохранения Республики Татарстан**  **ГАПОУ «Набережночелнинский медицинский колледж».** |
| **Отдел основного профессионального образования** |
| **ФОРМА 09**  **(версия 2)** | **ВЕДОМОСТЬ УЧЕТА УРОВНЯ ОСВОЕНИЯ ОБЩИХ КОМПЕТЕНЦИЙ** |

**ВЕДОМОСТЬ УЧЕТА УРОВНЯ ОСВОЕНИЯ ОБЩИХ КОМПЕТЕНЦИЙ**

СПЕЦИАЛЬНОСТЬ\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ПЕРИОД ОБУЧЕНИЯ\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ГРУППА\_\_\_\_\_\_\_\_\_

| №  п/п | ФИО  студента | ОК 1 | | | | | ОК 2 | | | | | ОК 3 | | | | | ОК 4. | | | | |
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| №  п/п | ФИО  студента | ОК 5 | | | | | ОК 6 | | | | | ОК 7 | | | | | ОК 8 | | | | |
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| ПМ  01 | ПМ  02 | ПМ  03 | ПМ 04 | Итог | ПМ  01 | ПМ  02 | ПМ  03 | ПМ  04 | Итог | ПМ  01 | ПМ  02 | ПМ  03 | ПМ  04 | Итог | ПМ  01 | ПМ  02 | ПМ  03 | ПМ  04 | Итог |
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| №  п/п | ФИО  студента | ОК 9 | | | | | ОК 10 | | | | | ОК 11 | | | | | ОК 12 | | | | |
| ПМ  01 | ПМ  02 | ПМ  03 | ПМ  04 | Итог | ПМ  01 | ПМ  02 | ПМ  03 | ПМ  04 | Итог | ПМ  01 | ПМ  02 | ПМ  03 | ПМ  04 | Итог | ПМ  01 | ПМ  02 | ПМ  03 | ПМ  04 | Итог |
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| №  п/п | ФИО  студента | ОК 13. | | | | | ОК 14. | | | | | | ОК 15. | | | | |
| ПМ  01 | ПМ  02 | ПМ  03 | ПМ 04 | Итог | ПМ  01 | ПМ  02 | | ПМ  03 | ПМ  04 | Итог | ПМ  01 | ПМ  02 | ПМ  03 | ПМ  04 | Итог |
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ДАТЫ ЗАПОЛНЕНИЯ ФОРМЫ: начало\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_окончание\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Зам. директора по учебной работе\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Зав отделением\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(подпись, расшифровка подписи) (подпись, расшифровка подписи)