**Załącznik Nr 2 do Zapytania Ofertowego**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PROGRAM SZKOLENIA** | | | | | | | | | | | | | | | | |
| NAZWA ZADANIA | | SZKOLENIA ZAWODOWE | | | | | | | | | | | | | | |
| NAZWA SZKOLENIA | | **Kosmetyczka** | | | | | | | | | | | | | | |
| REALIZATOR | |  | | OSOBA PROWADZĄCA | | |  | | | | | | | | | |
| WYMAGANE BADANIA PROFILAKTYCZNE  DLA UCZESTNIKÓW SZKOLENIA (Lekarz medycyny pracy, Sanepid, itp.) | | |  | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| **LP** | **PROGRAM SZKOLENIA** | | | | **LICZBA GODZIN** | **DATA** | | | | | | | | | | |
|  |  | | | |  | **D** | | **D** | **-** | **M** | **M** | **-** | **R** | **R** | **R** | **R** |
|  |  | | | |  | **D** | | **D** | **-** | **M** | **M** | **-** | **R** | **R** | **R** | **R** |
|  |  | | | |  | **D** | | **D** | **-** | **M** | **M** | **-** | **R** | **R** | **R** | **R** |
|  |  | | | |  | **D** | | **D** | **-** | **M** | **M** | **-** | **R** | **R** | **R** | **R** |
|  |  | | | |  | **D** | | **D** | **-** | **M** | **M** | **-** | **R** | **R** | **R** | **R** |
|  |  | | | |  | **D** | | **D** | **-** | **M** | **M** | **-** | **R** | **R** | **R** | **R** |
|  |  | | | |  | **D** | | **D** | **-** | **M** | **M** | **-** | **R** | **R** | **R** | **R** |
|  |  | | | |  | **D** | | **D** | **-** | **M** | **M** | **-** | **R** | **R** | **R** | **R** |
|  |  | | | |  | **D** | | **D** | **-** | **M** | **M** | **-** | **R** | **R** | **R** | **R** |
|  |  | | | |  | **D** | | **D** | **-** | **M** | **M** | **-** | **R** | **R** | **R** | **R** |
|  |  | | | |  | **D** | | **D** | **-** | **M** | **M** | **-** | **R** | **R** | **R** | **R** |
|  |  | | | |  | **D** | | **D** | **-** | **M** | **M** | **-** | **R** | **R** | **R** | **R** |
|  |  | | | |  | **D** | | **D** | **-** | **M** | **M** | **-** | **R** | **R** | **R** | **R** |
|  |  | | | |  | **D** | | **D** | **-** | **M** | **M** | **-** | **R** | **R** | **R** | **R** |
|  |  | | | |  | **D** | | **D** | **-** | **M** | **M** | **-** | **R** | **R** | **R** | **R** |
|  |  | | | |  | **D** | | **D** | **-** | **M** | **M** | **-** | **R** | **R** | **R** | **R** |
|  |  | | | |  | **D** | | **D** | **-** | **M** | **M** | **-** | **R** | **R** | **R** | **R** |

…………………………………………

Data i podpis oferenta