**SCUOLA MEDIA STATALE "F. Montanari” Mirandola (Mo)**

SEDE DI …………………

**RELAZIONE DI VERIFICA DEL P.D.F.**

Alunno /a ………………………………………….

Classe …………………

N. ro ore di frequenza settimanale ……………. ANNO SCOLASTICO ………../………….

1. Aree funzionali nelle quali si è prevalentemente intervenuto.

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B ) Obiettivi acquisiti ( abilità /capacità cognitive, di comunicazione,relazionali ecc. apprese).

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C ) Abilità /competenze non ancora possedute , quindi da promuovere , o da potenziare .

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Data ……………………..

Operatore dell'A.S.L. \_S.N.P.I. che ha partecipato alla verifica ………………………….

Per il C.di Classe : la Coordinatrice Prof.ssa ……………………………………………..

L'insegnante di sostegno Prof.ssa ………………………………….

IL DIRIGENTE SCOLASTICO

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