**Bewertungsblatt Jugendflamme Stufe 3 im Landkreis Regen**

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| **Abnahmeort** | | | | | | | **Feuerwehr** | | | | | | | | | **Datum** | | | | | | | | |
| **Übung** | **Name – Vorname** | **Geb. Datum – DJF-Ausweis-Nr.** |  |  |  |  | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |
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| **Erste-Hilfe-Kurs (16Std.)**  **vorhanden** | | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | |
| **Übung Erste Hilfe** | | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | |
| **Übung Schaumangriff** | | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | |
| **Übung Steckleitern** | | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | |
| **Mastwurf mit Halbschlag an Feuerwehraxt** | | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | |
| **Präsentation der eigenen Feuerwehr** | | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | |