**Bewertungsblatt Jugendflamme Stufe 1 im Landkreis Regen**

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| **Abnahmeort** | | | | | | | **Feuerwehr** | | | | | | | | | **Datum** | | | | | | | | |
| **Übung** | **Name – Vorname** | **Geb. Datum – DJF-Ausweis-Nr.** |  |  |  |  | |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |
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| **Notruf** | | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | |
| **Brustbund mit Spierenstich** | | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | |
| **Kreuzknoten** | | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | |
| **Mastwurf mit Halbschlag** | | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | |
| **Mastwurf gestochen** | | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | |
| **Zimmermannsschlag** | | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | |
| **Handhabung Verteiler** | | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | |
| **Handhabung Strahlrohre** | | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | |
| **Sportl., kultur., soziale oder ökologische Tätigkeit** | | |  | |  | | |  | |  | |  | |  | | |  | |  | |  | |  | |