

Mein Stundenplan



Name _____

Klasse _____ Schuljahr _____



| Zeit | Montag | Dienstag | Mittwoch | Donnerstag | Freitag |
|------|--------|----------|----------|------------|---------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |

