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**บันทึกผลการจัดกิจกรรมตามนโยบายลดเวลาเรียน เพิ่มเวลารู้**

**ชื่อกิจกรรม.........................................**

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| **สัปดาห์ที่** | **วัน/เดือน/ปี** | **ผู้เรียนได้มีการปฏิบัติกิจกรรมอย่างไรบ้าง** | **จำนวนสมาชิก** |
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**สรุปการจัดกิจกรรม...............................................................................................................................**

จากการจัดกิจกรรมมีสมาชิกทั้งสิ้น จำนวน..................คน

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**ปัญหาและอุปสรรคในการจัดกิจกรรม**

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**ข้อเสนอแนะหรือแนวทางการแก้ไข**

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**จุดเด่นของการจัดกิจกรรม**

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ลงชื่อ ............................................................. ลงชื่อ...........................................................

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หัวหน้ากลุ่มสาระการเรียนรู้.................................. หัวหน้ากิจกรรม “เพิ่มเวลารู้” ชั้น ม.......

ลงชื่อ ........................................................ ลงชื่อ ........................................................

(นายพิชัย เหลืองอรุณ) (..................................................)

หัวหน้างานพัฒนาหลักสูตรฯ รองผู้อำนวยการกลุ่มบริหารวิชาการ

ลงชื่อ ........................................................

(นางตรีสุคนธ์ จิตต์สงวน)

ผู้อำนวยการโรงเรียนศรีอยุธยา ในพระอุปถัมภ์ฯ