

Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

Modulo formativo: GDPR

## PROGRAMMA SVOLTO

Data Strategy

Registro del: 01/06/2021

Firma Docente

*Denis De Micheli*

LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00	<i>Rosa Giannola</i>	12:00	<i>Rosa Giannola</i>
ISABELLA ANNA CAMPANELLI	09:00	<i>Isabella Anna Campanelli</i>	12:00	<i>Isabella Anna Campanelli</i>
PATRIZIA SEMERARO	09:00	<i>Patrizia Semeraro</i>	12:00	<i>Patrizia Semeraro</i>
MARINA FIUME	09:00	<i>Marina Fiume</i>	12:00	<i>Marina Fiume</i>
NICOLA LIUZZI	09:00	<i>Nicola Liuzzi</i>	12:00	<i>Nicola Liuzzi</i>
CATERINA MUOLO	09:00	<i>Caterina Muolo</i>	12:00	<i>Caterina Muolo</i>
MARIALURA ROTONDO	09:00	<i>Marialura Rotondo</i>	12:00	<i>Marialura Rotondo</i>
LUCIANA CURLO	09:00	<i>Luciana Curlo</i>	12:00	<i>Luciana Curlo</i>
FLORIANO FAUZZI	09:00	<i>Floriano Fauzzi</i>	12:00	<i>Floriano Fauzzi</i>
PRUDENZIA LOSAVIO	09:00	<i>Prudenzia Losavio</i>	12:00	<i>Prudenzia Losavio</i>
ANTONELLA MANOSPERTA	09:00	<i>Antonella Manosperta</i>	12:00	<i>Antonella Manosperta</i>

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, consisting of a stylized 'P' followed by 'ml'.

Note

Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

Modulo formativo: GDPR

**PROGRAMMA SVOLTO**

Social BI &amp; Location Intelligence

Registro del: 03/06/2021

Firma Docente

*Denis De Micheli*

LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00	<i>Rosa Giannola</i>	12:00	<i>Rosa Giannola</i>
ISABELLA ANNA CAMPANELLI	09:00	<i>Isabella Anna Campanelli</i>	12:00	<i>Isabella Anna Campanelli</i>
PATRIZIA SEMERARO	09:00	<i>Patrizia Semeraro</i>	12:00	<i>Patrizia Semeraro</i>
MARINA FIUME	09:00	<i>Marina Fiume</i>	12:00	<i>Marina Fiume</i>
NICOLALIUZZI	09:00	<i>Nicola Liuzzi</i>	12:00	<i>Nicola Liuzzi</i>
CATERINA MUOLO	09:00	<i>Caterina Muolo</i>	12:00	<i>Caterina Muolo</i>
MARIALURA ROTONDO	09:00	<i>Maria Lura Rotondo</i>	12:00	<i>Maria Lura Rotondo</i>
LUCIANA CURLO	09:00	<i>Luciana Curlo</i>	12:00	<i>Luciana Curlo</i>
FLORIANO FAUZZI	09:00	<i>Florian Fauzzi</i>	12:00	<i>Florian Fauzzi</i>
PRUDENZIA LOSAVIO	09:00	<i>Prudenzia Losavio</i>	12:00	<i>Prudenzia Losavio</i>
ANTONELLA MANOSPERTA	09:00	<i>Antonella Manosperta</i>	12:00	<i>Antonella Manosperta</i>

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

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Note

Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

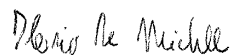
Modulo formativo: GDPR

## PROGRAMMA SVOLTO

Social BI &amp; Location Intelligence

Registro del: 14/06/2021

Firma Docente



LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, consisting of a stylized 'P' followed by 'ml' and a horizontal stroke.

Note

Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

Modulo formativo: GDPR

## PROGRAMMA SVOLTO

Social BI &amp; Location Intelligence

Registro del: 15/06/2021

Firma Docente

Floris De Micheli

LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00	Rosa Giannola	12:00	Rosa Giannola
ISABELLA ANNA CAMPANELLI	09:00	Isabella Anna Campanelli	12:00	Isabella Anna Campanelli
PATRIZIA SEMERARO	09:00	Patrizia Semeraro	12:00	Patrizia Semeraro
MARINA FIUME	09:00	Marina Fiume	12:00	Marina Fiume
NICOLA LIUZZI	09:00	Nicola Liuzzi	12:00	Nicola Liuzzi
CATERINA MUOLO	09:00	Caterina Muolo	12:00	Caterina Muolo
MARIALURA ROTONDO	09:00	Marialura Rotondo	12:00	Marialura Rotondo
LUCIANA CURLO	09:00	Luciana Curlo	12:00	Luciana Curlo
FLORIANO FAUZZI	09:00	Floriano Fauzzi	12:00	Floriano Fauzzi
PRUDENZIA LOSAVIO	09:00	Prudenzia Losavio	12:00	Prudenzia Losavio
ANTONELLA MANOSPERTA	09:00	Antonella Manosperta	12:00	Antonella Manosperta

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, consisting of a large, stylized capital 'P' followed by a series of loops and a final downward stroke.

Note



Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICALCLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

Modulo formativo: GDPR

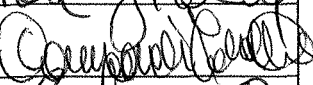
## PROGRAMMA SVOLTO

Integrated Analytics Lab

Registro del: 22/06/2021

Firma Docente

Domenico De Micheli

LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

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Titolo del progetto: MEDICALCLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

Modulo formativo: GDPR

## PROGRAMMA SVOLTO

Integrated Analytics Lab

Registro del: 12/07/2021

Firma Docente

Denis De Micheli

LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00	Rosa Giannola	12:00	Rosa Giannola
ISABELLA ANNA CAMPANELLI	09:00	Isabella Anna Campanelli	12:00	Isabella Anna Campanelli
PATRIZIA SEMERARO	09:00	Patrizia Semeraro	12:00	Patrizia Semeraro
MARINA FIUME	09:00	Marina Fiume	12:00	Marina Fiume
NICOLA LIUZZI	09:00	Nicola Liuzzi	12:00	Nicola Liuzzi
CATERINA MUOLO	09:00	Caterina Muolo	12:00	Caterina Muolo
MARIALURA ROTONDO	09:00	Marialura Rotondo	12:00	Marialura Rotondo
LUCIANA CURLO	09:00	Luciana Curlo	12:00	Luciana Curlo
FLORIANO FAUZZI	09:00	Floriano Fauzzi	12:00	Floriano Fauzzi
PRUDENZIA LOSAVIO	09:00	Prudenzia Losavio	12:00	Prudenzia Losavio
ANTONELLA MANOSPERTA	09:00	Antonella Manosperta	12:00	Antonella Manosperta

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

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Soggetto Beneficiario: L.3 S.R.L.

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Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

Modulo formativo: GDPR

## PROGRAMMA SVOLTO

Integrated Analytics Lab

Registro del: 13/07/2021

Firma Docente

Denis De Micheli

LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

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Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

Modulo formativo: GDPR

**PROGRAMMA SVOLTO**

Conclusione modulo formativo

Registro del: 21/07/2021

Firma Docente

*Denis De Micheli*

LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00	<i>Rosa Giannola</i>	12:00	<i>Rosa Giannola</i>
ISABELLA ANNA CAMPANELLI	09:00	<i>Isabella Anna Campanelli</i>	12:00	<i>Isabella Anna Campanelli</i>
PATRIZIA SEMERARO	09:00	<i>Semeraro P.</i>	12:00	<i>Semeraro P.</i>
MARINA FIUME	09:00	<i>Marina Fiume</i>	12:00	<i>Marina Fiume</i>
NICOLA LIUZZI	09:00	<i>Nicola Liuzzi</i>	12:00	<i>Nicola Liuzzi</i>
CATERINA MUOLO	09:00	<i>Caterina Muolo</i>	12:00	<i>Caterina Muolo</i>
MARIALURA ROTONDO	09:00	<i>Maria Lura Rotondo</i>	12:00	<i>Maria Lura Rotondo</i>
LUCIANA CURLO	09:00	<i>Luciana Curlo</i>	12:00	<i>Luciana Curlo</i>
FLORIANO FAUZZI	09:00	<i>Flora Fauzi</i>	12:00	<i>Flora Fauzi</i>
PRUDENZIA LOSAVIO	09:00	<i>Prudenzia Losavio</i>	12:00	<i>Prudenzia Losavio</i>
ANTONELLA MANOSPERTA	09:00	<i>Antonella Manosperta</i>	12:00	<i>Antonella Manosperta</i>

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, consisting of a large, stylized capital 'P' followed by a series of loops and a final downward stroke.

Note



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Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

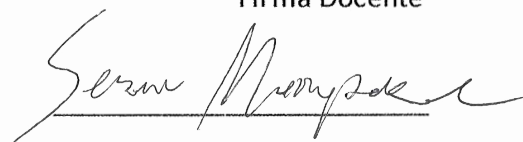
Modulo formativo: CRM SALES FORCES

**PROGRAMMA SVOLTO**

Introduzione Modulo Formativo

Registro del: 22/07/2021

Firma Docente



LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, consisting of a large, stylized capital 'P' followed by a series of loops and a final vertical stroke.

Note

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Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

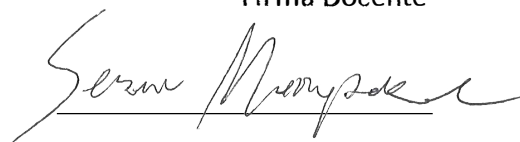
Modulo formativo: CRM SALES FORCES

**PROGRAMMA SVOLTO**

Il ruolo del CRM in azienda

Registro del: 27/07/2021

Firma Docente



LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, consisting of a stylized 'P' followed by a series of loops and a final vertical stroke.

Note

Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

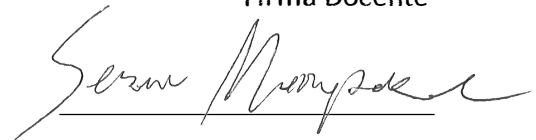
Modulo formativo: CRM SALES FORCES

**PROGRAMMA SVOLTO**

Il ruolo del CRM in azienda

Registro del: 28/07/2021

Firma Docente



LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, consisting of a large, stylized capital 'P' followed by a series of loops and a final downward stroke.

Note

Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

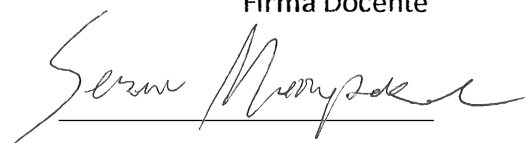
Modulo formativo: CRM SALES FORCES

## PROGRAMMA SVOLTO

Il ruolo del CRM in azienda

Registro del: 01/09/2021

Firma Docente



LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, consisting of a stylized 'P' followed by a series of loops and a final horizontal stroke.

Note



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Partita iva aziendale: 07640280728

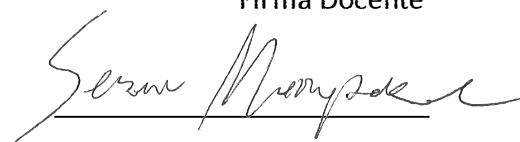
Modulo formativo: CRM SALES FORCES

**PROGRAMMA SVOLTO**

Posizionamento Strategico Offerta prodotti, servizi

Registro del: 02/09/2021

Firma Docente



LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, consisting of a large, stylized capital 'P' followed by a series of loops and a final vertical stroke.

Note

Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

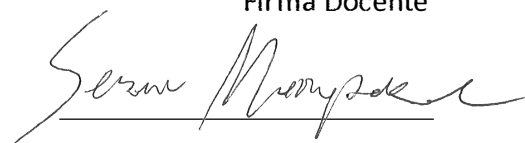
Modulo formativo: CRM SALES FORCES

**PROGRAMMA SVOLTO**

Posizionamento Strategico Offerta prodotti, servizi

Registro del: 07/09/2021

Firma Docente



LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, appearing to be 'P. M.', enclosed within a circular stamp or seal.

Note

Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

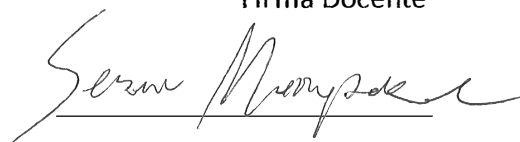
Modulo formativo: CRM SALES FORCES

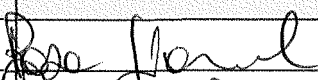
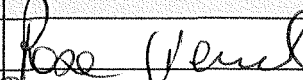
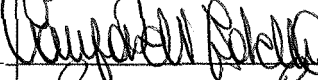

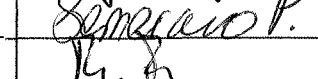

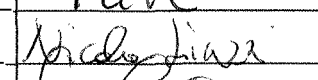
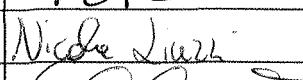

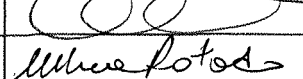
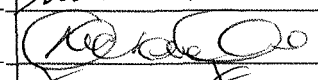
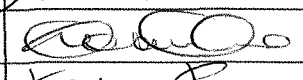
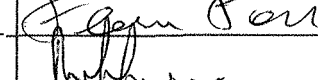
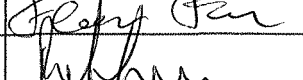
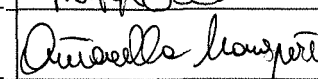
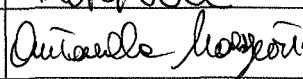






**PROGRAMMA SVOLTO**

Posizionamento Strategico Offerta prodotti, servizi

Registro del: 08/09/2021

Firma Docente



LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, consisting of a large, stylized 'P' followed by some less distinct characters, likely representing the legal representative.

Note

Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

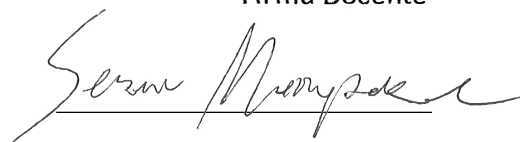
Modulo formativo: CRM SALES FORCES

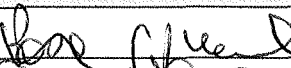




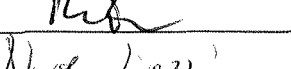
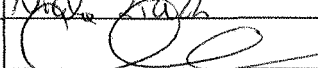

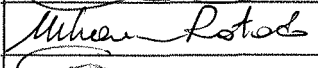
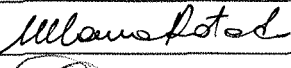


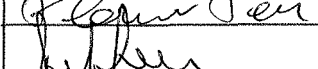
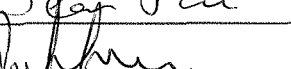
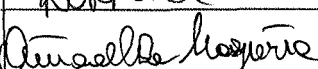
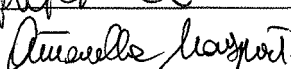




**PROGRAMMA SVOLTO**

Gestione della scheda cliente

Registro del: 09/09/2021

Firma Docente



LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, consisting of a stylized 'P' followed by a series of loops and a final horizontal stroke.

Note



Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

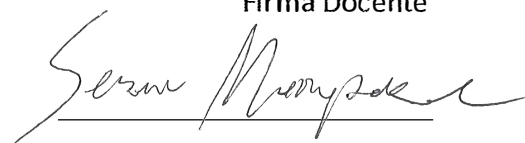
Modulo formativo: CRM SALES FORCES

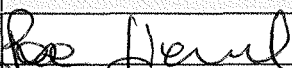
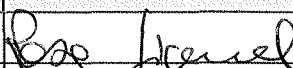



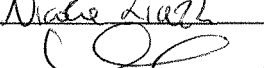
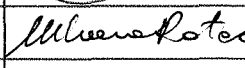

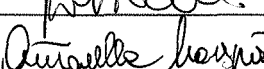
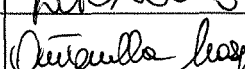
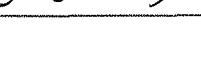

## PROGRAMMA SVOLTO

Gestione della scheda cliente

Registro del: 13/09/2021

Firma Docente



LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, consisting of a stylized 'P' followed by 'ml'.

Note

Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

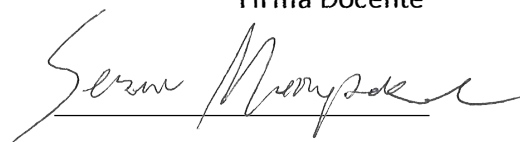
Modulo formativo: CRM SALES FORCES

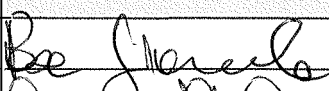
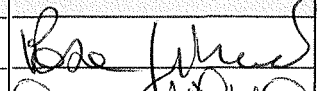
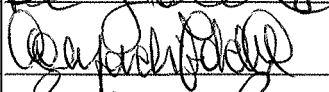
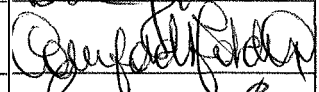
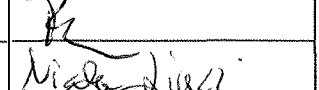
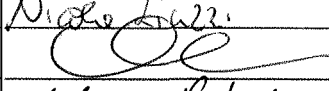
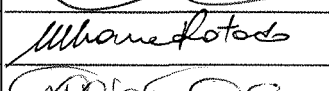
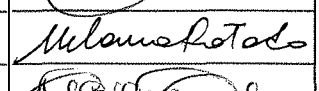

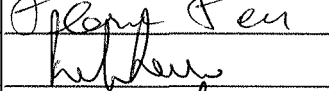
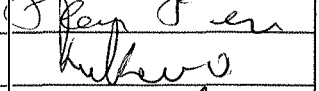
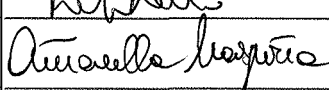
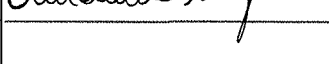
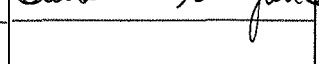
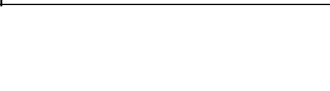
**PROGRAMMA SVOLTO**

Gestione della scheda cliente

Registro del: 14/09/2021

Firma Docente



LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, consisting of a large, stylized 'P' followed by a series of loops and a final vertical stroke.

Note

Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

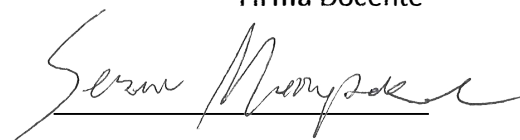
Modulo formativo: CRM SALES FORCES

**PROGRAMMA SVOLTO**

Macro Processo Marketing

Registro del: 15/09/2021

Firma Docente



LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, consisting of a stylized 'P' followed by a series of loops and a final vertical stroke.

Note

Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

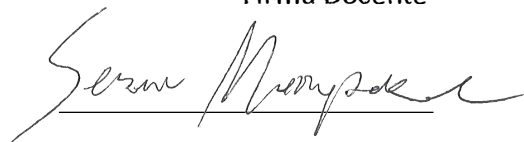
Modulo formativo: CRM SALES FORCES

**PROGRAMMA SVOLTO**

Macro Processo Marketing

Registro del: 20/09/2021

Firma Docente



LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, appearing to be 'P. M.' or similar, enclosed within a circular or oval shape.

Note



Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

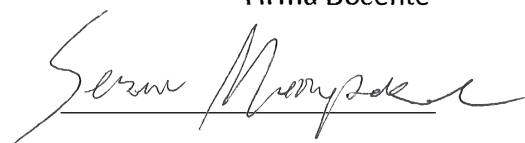
Modulo formativo: CRM SALES FORCES

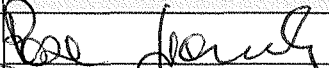
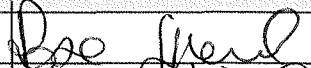

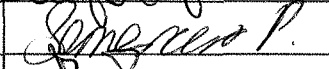
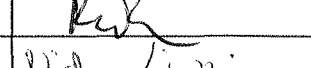


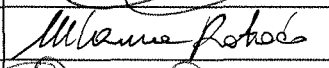


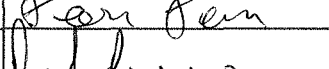
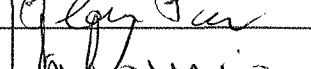
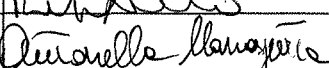
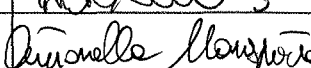
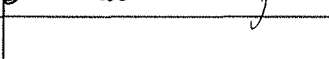



## PROGRAMMA SVOLTO

Macro Processo Marketing

Registro del: 21/09/2021

Firma Docente



LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANACURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, consisting of a stylized 'P' followed by a series of loops and a final vertical stroke.

Note

Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

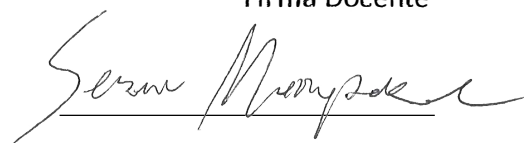
Modulo formativo: CRM SALES FORCES

## PROGRAMMA SVOLTO

Macro Processo Sales

Registro del: 22/09/2021

Firma Docente



LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, consisting of a large, stylized capital 'P' followed by a series of loops and a final vertical stroke.

Note

Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

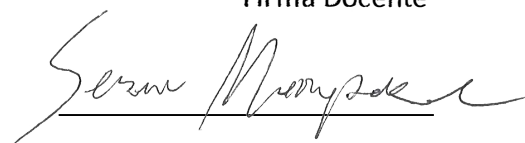
Modulo formativo: CRM SALES FORCES

**PROGRAMMA SVOLTO**

Macro Processo Sales

Registro del: 23/09/2021

Firma Docente



LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, appearing to be 'Pml', enclosed within a circular stamp or seal.

Note

Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

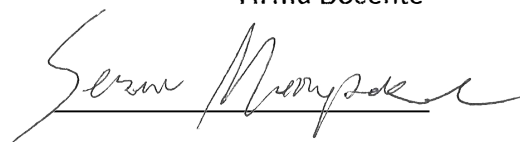
Modulo formativo: CRM SALES FORCES

## PROGRAMMA SVOLTO

Macro Processo Sales

Registro del: 27/09/2021

Firma Docente



LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, consisting of a large, stylized 'P' followed by a series of loops and a final vertical stroke.

Note



Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

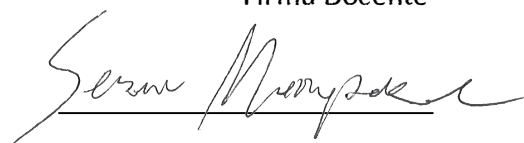
Modulo formativo: CRM SALES FORCES

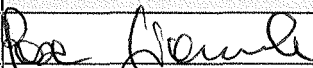


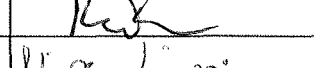

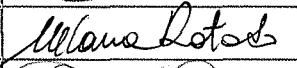

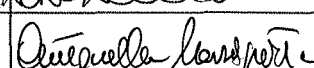
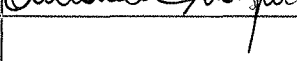
**PROGRAMMA SVOLTO**

Campagne lead generation CRM

Registro del: 28/09/2021

Firma Docente



LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, appearing to be 'P. M.' or similar, enclosed within a hand-drawn rectangular box.

Note

Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

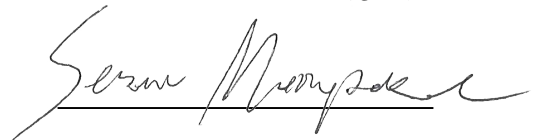
Modulo formativo: CRM SALES FORCES

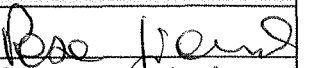



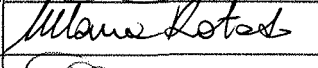
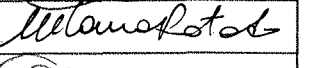
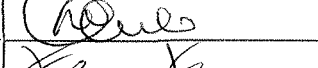
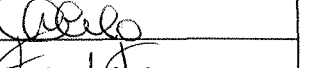
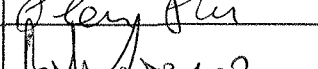
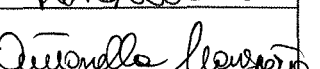

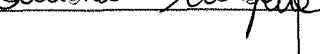


**PROGRAMMA SVOLTO**

Campagne lead generation CRM

Registro del: 29/09/2021

Firma Docente



LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, consisting of a large, stylized capital 'P' followed by a series of loops and a final vertical stroke.

Note

Soggetto Beneficiario: L.3 S.R.L.

Titolo del progetto: MEDICAL CLINIC 4.0

Sede di svolgimento: VIA CONCHIA 2 - CAP 70043 - MONOPOLI (BA)

Partita iva aziendale: 07640280728

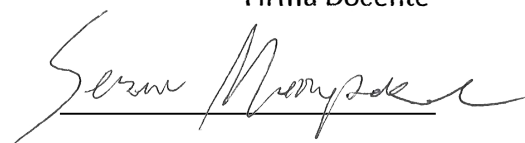
Modulo formativo: CRM SALES FORCES

## PROGRAMMA SVOLTO

Campagne lead generation CRM

Registro del: 30/09/2021

Firma Docente



LAVORATORE	ORA INGRESSO	FIRMA	ORA USCITA	FIRMA
ROSA GIANNOLA	09:00		12:00	
ISABELLA ANNA CAMPANELLI	09:00		12:00	
PATRIZIA SEMERARO	09:00		12:00	
MARINA FIUME	09:00		12:00	
NICOLA LIUZZI	09:00		12:00	
CATERINA MUOLO	09:00		12:00	
MARIALURA ROTONDO	09:00		12:00	
LUCIANA CURLO	09:00		12:00	
FLORIANO FAUZZI	09:00		12:00	
PRUDENZIA LOSAVIO	09:00		12:00	
ANTONELLA MANOSPERTA	09:00		12:00	

Numero ore giornaliere: 3

Totale presenze allievi del giorno N. 11

Il Legale rappresentante

A handwritten signature in black ink, appearing to be 'P. M.' or similar, enclosed within a hand-drawn rectangular box.

Note