**Planning contrat en selon horaire**

**UAPE**

Fréquentation mensuelle 2025

**MARS**

**Nom et prénom de l’enfant :**

**Signature(s) du/des parents** :

**Planning reçu le** : ……………………………. (à remplir par la Chocolatine)

*Mettre une* ***X*** *dans les cases correspondantes*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **DATES** | **Période MATIN** | **DEJ** | **Période MIDI** | **Période MIDI + APM** | **Période MATIN + MIDI** | **½ journée (MATIN ou APM)** | **Période SOIR**  | **REMARQUES** |
| Lundi 3 | **Fermé** |
| Mardi 4 |
| Mercredi 5 |
| Jeudi 6 |
| Vendredi 7 |
|  |  |
| Lundi 10 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Mardi 11 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Mercredi 12 | [ ]  | [ ]  | **Fermé** |
| Jeudi 13 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Vendredi 14 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
|  |  |
| Lundi 17 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Mardi 18 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Mercredi 19 | **Fermé** |
| Jeudi 20 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Vendredi 21 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
|  |  |
| Lundi 24 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Mardi 25 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Mercredi 26 | [ ]  | [ ]  | **Fermé** |
| Jeudi 27 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
| Vendredi 28 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |
|  |  |
| Lundi 31 | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |       |