|  |  |  |  |
| --- | --- | --- | --- |
| **Dates** | **Nombre d'heures** | **Horaires** | **Signature stagiaire** |
| 16-06-2020 | 2 | 16:00 - 18:00 |  |
| 17-06-2020 | 2 | 16:00 - 18:00 |  |
| 22-06-2020 | 2 | 16:00 - 18:00 |  |
| 24-06-2020 | 2 | 16:00 - 18:00 |  |
| 28-06-2020 | 2 | 16:00 - 18:00 |  |
| 30-06-2020 | 2 | 16:00 - 18:00 |  |
| 04-07-2020 | 2 | 16:00 - 18:00 |  |
| 06-07-2020 | 2 | 16:00 - 18:00 |  |
| 11-07-2020 | 2 | 16:00 - 18:00 |  |
| 13-07-2020 | 2 | 16:00 - 18:00 |  |
| 18-07-2020 | 2 | 16:00 - 18:00 |  |
| 21-07-2020 | 2 | 16:00 - 18:00 |  |

|  |  |
| --- | --- |
|  | J’atteste avoir reçu mon attestation de fin de formation ANDRIAMANANTENA SAHONDRA |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | |  |  | | --- | --- | | **Nom du formateur** | **Signature du formateur** | |  |  | |