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**COMMUNICATION ANNUELLE DES ÉTABLISSEMENTS PRIVES HORS CONTRAT**

**PERSONNES EXERÇANT DANS LES ETABLISSEMENTS PRIVES D’ENSEIGNEMENT SCOLAIRE COMPORATNT DES CLASEES HORS CONTRAT**

Nom de l'établissement : …………………………………………………………..

|  | **Nom patronymique** | **Prénom** | **Fonction (enseignement ou autre)** | **Date d’entrée en fonction** |
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